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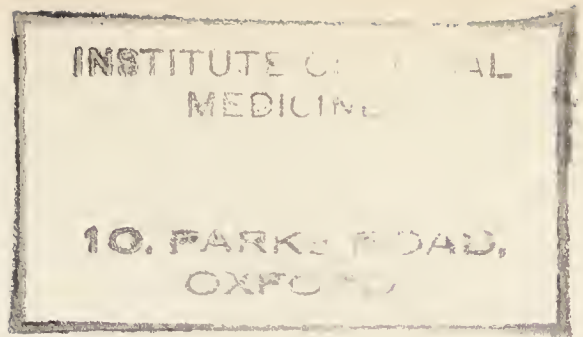
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CITY OF SHEFFIELD
EDUCATION COMMITTEE

SCHOOL HEALTH SERVICE REPORT

OF THE
SCHOOL MEDICAL OFFICER,
HAROLD M. COHEN, M.D., D.P.H.

FOR THE YEAR ENDED 31ST DECEMBER, 1948
[FORTY-FIRST YEAR]



CITY OF SHEFFIELD
EDUCATION COMMITTEE

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CHILD WELFARE SUB-COMMITTEE

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Coun. Miss M. VEITCH (Deputy Chairman).

Coun. A. ALLARD.
Ald. J. H. BINGHAM, J.P.
Coun. E. E. G. BRADBURY, O.B.E.
Coun. W. COOKE, J.P.
Mr. C. S. DARVILL.
Rev. F. DUCKWORTH.
Mr. A. W. FISHBURN.
Coun. P. C. J. T. KIRKMAN.

Mrs. C. M. LANGLEY PRICE.
Coun. Rev. P. M. MEDCRAFT.
Mrs. E. H. MILLER, J.P.
Ald. A. SMITH.
Mrs. C. SUMNER, B.Sc., J.P.
Mr. G. SYLVESTER.
Coun. E. TINDALL.

SHEFFIELD BLIND SCHOOL MANAGEMENT COMMITTEE.

*Mr. A. HARLAND, J.P. (Chairman).

Coun. J. F. WILLIAMS (Deputy Chairman).

Coun. A. BALLARD.
Ald. J. H. BINGHAM, J.P.
*Mr. N. BODDY.
Coun. E. E. G. BRADBURY, O.B.E.
Mr. C. S. DARVILL.
*Mr. R. HARGREAVES, M.A., LL.B.
*Mr. N. HARLAND.

*Lt.-Col. R. B. HAYWOOD.
*Mr. C. E. HIBBERD.
Mrs. C. M. LANGLEY PRICE.
Mrs. E. H. MILLER, J.P.
Coun. E. TINDALL.
Coun. Miss M. VEITCH.

*Co-opted members who were previously Governors of the School.

Director of Education—STANLEY MOFFETT, M.C., M.A.

STAFF

School Medical Officer.

HAROLD M. COHEN, M.D., D.P.H.

Assistant School Medical Officers.

JOSEPH H. CAMPAIN, M.B., B.S., M.R.C.S.,
L.R.C.P., D.P.H.
MARION C. TAYLOR, M.B., Ch.B., D.P.H.
WILLIAM D. A. KING, M.B., Ch.B.
DORIS E. MORTON, B.A., M.B., B.Ch.

CHARLES O. GREER, B.A., M.B., B.Ch.
ELSIE G. M. OATES, M.D., M.R.C.S., L.R.C.P.
ETHEL SKERRITT, M.D., M.R.C.S., L.R.C.P.
D.P.H.
EITHNE M. SWALLOW, B.A., M.B., B.Ch.
(One vacancy for Assistant School Medical Officer).

Specialist Officers.

Ophthalmic Section
Aural Section
Orthopædic Section

Rheumatism and Heart
Orthodontic Section

MALCOLM FERGUSON, M.B., B.S., D.O.M.S.
*JOHN H. COBB, M.B., B.S., F.R.C.S.
*J. DUNCAN GRAY, M.B., Ch.B., F.R.C.S.
*FRANK W. HOLDSWORTH, B.A., M.Chir., F.R.C.S.
*ALFORD DORNAN, M.B., Ch.B., F.R.C.S.
*SUSANNA GORDON, M.D., B.S., M.R.C.P., D.C.H.
*JAMES H. GARDINER, B.D.S.

Senior School Dental Surgeon.

J. WALTER SHAW, H.D.D., L.D.S.R.C.S.

School Dental Surgeons.

EDMUND A. REEVE, L.D.S.R.C.S.
MARY M. PELLATT, L.D.S.R.C.S.
ALFRED E. GISBURN, L.D.S.
AGNES M. THOSEBY, L.D.S.

ALBERT E. CLARKE, L.D.S.
THOMAS B. HOSTY, L.D.S.
EDITH M. WOODCOCK, L.D.S.
JOHN CLARKE, L.D.S.
(Three vacancies for School Dental Surgeons).

CHILD GUIDANCE CLINIC.

Medical Director—THE SCHOOL MEDICAL OFFICER.

NOEL E. WHILDE, B.Sc., A.B.Ps.S.
(Educational Psychologist in charge).
ALICE M. McFARLANE, M.A., Ed.B.
(Educational Psychologist).
MONA M. THOMSON, M.A., Ed.B.
(Educational Psychologist).

BETTY BERNTHAL, B.Sc.
(Educational Psychologist).
*REGINALD WARNECKE, M.R.C.S., L.R.C.P.
(Part-time Psychiatrist).
(One vacancy for Psychiatric Social Worker).

*Part-time Officers.

BENTS GREEN SPECIAL SCHOOL FOR DELICATE CHILDREN.

KATHLEEN GRAYSON (Matron).

EDITH M. K. ASHFORTH (Resident School
Nursing Sister).

VALERIE HODGSON (Resident Foster-Mother).

ASH HOUSE SCHOOL FOR RHEUMATIC CHILDREN.

ELSIE JOHNSON (Matron)

MURIEL M. HARTLEY (Acting Sister).

MARY GOODCHILD (Assistant Nurse).

ETHEL O'BRIEN (Assistant Nurse).

And four Nursing Probationers.

DOREEN LENG (Assistant Nurse).

SHEFFIELD SCHOOL FOR BLIND CHILDREN.

Mrs. G. BLOOMFIELD (Matron).

School Nursing Sisters.

ELSIE C. CRUICKSHANK (Chief School Nursing Sister).

PHYLLIS M. ARTHUR.

EVELYN N. F. HENIGAN.

JESSIE ASHTON.

CLARICE HOBSON.

EVELINE BANHAM.

NORA HOBSON.

Mrs. MARGUARITE S. BEARD.

CONSTANCE M. LAMBERT.

Mrs. LILIAN COMPTON.

Mrs. PHYLLIS L. LOWE.

MARGARET CROFTON.

Mrs. KATHLEEN MOGAN.

ELSIE DENT.

Mrs. MARY A. REID.

EDITH DONCASTER.

LUCY SCOTT.

ELLEN K. FINERTY.

EUNICE M. SHARRATT.

Mrs. MARY B. FOX.

DOROTHY M. SLATOR.

Mrs. MARGARET GARNETT.

Mrs. EMILY D. SMITH.

FLORENCE M. GIBSON.

Mrs. DAISY WILLIAMSON.

ELIZABETH GOOSEMAN

SYLVIA M. WILLIAMSON.

Mrs. MIMA J. GOWERS.

Mrs. ELSIE S. WOODWARD.

Mrs. HILDA GREEN.

(Three vacancies for School Nursing Sisters).

Nursing Assistants.

Mrs. DOROTHY R. BAKER.

Mrs. MAUD CROOKES.

KATHLEEN J. BELL.

ELIZABETH GILL.

KATHLEEN E. BENNETT.

WINIFRED C. SELLARS.

WINIFRED CLEGG.

NORRIE A. SMITH.

ENID CLOUGH.

ROSALIE V. SWEENEY

ELSIE M. COULDWELL.

MARY WALLACE.

Dental Assistants.

ELSIE INGRAM.

LUCY SUNTER.

Dental Attendants.

CONSTANCE V. BOWIE.

CLARA L. MARSDEN.

DOROTHY V. BROWN.

Mrs. FRANCES MORRIS.

EVELYN EASTERBROOK.

WINIFRED M. McKENZIE.

JEAN FAIRBURN.

ETHEL OTTER.

ROSE HASLAM.

ELLEN TRUMAN.

CLARE E. MARLOW.

(One vacancy for Dental Attendant).

Speech Therapists.

JOAN POLLITT, L.C.S.T. (Senior Speech Therapist).

DIANA M. GOSTELOW, L.C.S.T.

Mrs. JOANNA B. PEPPERELL, L.C.S.T.

Chiropodist—*LEONARD ALDAM, M.Ch.S.**After Care Officer**—WINIFRED STIRGESS.**Dispenser at Clinics**—BESSIE KENYON.**Part-time Orthoptist**—(Vacancy).**Clerical Staff.**

REGINALD E. NORTH (Chief Clerk).

ERNEST R. WOOD.

BETTY E. BLACKWELL.

ERNEST V. STEER.

EVELYN E. GERRISH.

FRANK CROOKES.

Mrs. BRENDA E. PORTER.

WILLIAM F. HERN.

BEATRICE M. HURST.

JOHN LOCKWOOD.

JEAN SMITH.

LEONARD CORKER.

BRENDA SMITH.

ERNEST BURKINSHAW.

LILY TOWNROW.

LILIAN SMITH.

AUDREY JACKSON.

Mrs. DOROTHY MACDONALD.

Mrs. JOAN W. LLOYD.

JOAN M. SPARLING.

ETHEL M. BIRCH.

MARION J. WALKER.

DOROTHY K. HEMS.

Mrs. SILVIA M. WILLIAMS.

JUNE P. CAMDEN.

Mrs. CONSTANCE CLINTON.

THERESA FARRELL.

Mrs. ALICE M. RUSSON.

MARGARET O. DIXON.

* Part-time Officer.

SCHOOL HEALTH SERVICE,**CENTRAL SCHOOL CLINIC :** 7, Leopold Street, Sheffield, 1. (Telephone 26341).

December, 1948.

SUMMARY OF WORK. 1948

	Children.	Attendances.
SCHOOL MEDICAL OFFICERS AT SCHOOLS—		
Visits to Schools—	2,047	
Routine Inspection—		
Primary and Secondary Schools	17,340	
Special Schools	620	
Nursery Schools and Classes	2,013	
Selected cases	1,880	
“ Following up ”	5,470	
Special visits	5,169	
SCHOOL MEDICAL OFFICERS AT SCHOOL CLINICS—		
Inspection Clinic	18,255	40,480
Minor Ailment Clinic	18,645	32,979
OPHTHALMIC CLINIC—		
Treated by the Surgeon	5,968	11,056
Dressed by Nursing Sisters	2,138	10,761
AURAL CLINIC—		
Treated by the Surgeons	662	733
Dressed by Nursing Sisters	2,383	20,521
DENTAL CLINIC—		
Inspected at schools	20,128	
Inspected at clinics	7,792	
Treated by School Dental Surgeons	15,551	30,562
ORTHOPÆDIC CLINIC—		
Examined by the Surgeons	673	1,046
RHEUMATISM AND HEART CLINIC—		
Examined by the Physician	475	517
CHILD GUIDANCE CLINIC	493	3,422
SPEECH THERAPY CLINIC	229	2,411
CHIROPODY CLINIC—		
Treated by the Chiropodist	463	1,075
IMMUNIZATION AGAINST DIPHTHERIA—		
At schools and clinics	5,318	6,660
SCHOOL NURSING SISTERS AND NURSING ASSISTANTS—		
Examinations of children in schools	272,139	
Visits to homes	2,589	
Minor dressings at clinics and schools	18,095	103,451
TOTAL ATTENDANCES OF CHILDREN AT SCHOOL CLINICS		265,674

CITY OF SHEFFIELD

GENERAL INFORMATION.

Population	511,757
Area	39,598 acres.
Density of Population	12·9 persons per acre.
Rateable Value	£3,264,960
Education Rate	67·34d.
Penny Rate produces	£12,742
Primary and Secondary Schools (including Nursery Schools)—	
Number of schools	129
Number of departments	203
Average number on rolls	71,179
Special Schools—	
Number of schools	13
Average number on rolls	1,187

CITY OF SHEFFIELD
EDUCATION COMMITTEE

SCHOOL HEALTH SERVICE

TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION COMMITTEE.

I have the honour to present for your consideration the report on the work of the School Health Service for the year ended 31st December, 1948.

The Minister of Education has asked for observations on the effect of the National Health Service Act which came into force on July 5th, 1948. An act which has so far reaching effects on the health services of the country generally, naturally reorientates certain aspects of the School Health Service. With the goodwill and appreciation of the Ministry's recognition that "For many decades the building up of the School Health Service has been a work of the highest national importance and it is vital that there should be no relaxation," shown by the administrators now concerned with the Service it would appear that the facilities available for the health of the children will continue in their present form. A note on the new relationships will be found in the Report. The transfer of Ash House School, to the Regional Hospital Board, however, must be mentioned here with a feeling of regret. The Committee were in the van of progress in their concern for the help which could be given to rheumatic children and were naturally sensible of the excellent results achieved at the school.

In general the health of the children has been maintained during the past year. The preventive outlook is becoming more firmly established. As mentioned in previous reports the importance of health education is recognised in the schools and the courses in Sheffield arranged by the Central Council for Health Education for teachers and school nursing sisters have acted as a fillip.

There has been a further fall in the incidence of diphtheria undoubtedly due to the prophylactic measures taken to combat this disease.

Close co-operation with the Hospitals continues to the benefit of the children. Active links have been made by the appointment of Mr. J. W. Shaw, the Senior School Dental Surgeon, as Honorary Dental Surgeon and University Clinical Teacher at the Dental Hospital and through Mr. Ferguson, the ophthalmologist, who assists at out-patients in the Ophthalmic Department at the Royal Hospital.

The Consultant Orthodontist, Mr. Gardiner, commenced his visits in April and has proved of much value to the work of the dental clinics.

The Chiropody Clinic was opened in January, 1948, with Mr. Aldam in attendance. The service has been in great demand since and it is interesting to note that the parents also express relief following the children's treatment!

An extension of the inter-availability services provided between the School Health Service and Public Health Department was agreed on in principle during the year. The Committee agreed to the extension of dental treatment to children under the age of five who are not attending school and to arrangements whereby the dental treatment of expectant and nursing mothers can be undertaken at school dental clinics.

The Committee have also agreed to allow the Maternity and Child Welfare Department the use of the Attercliffe Branch Clinic on a user basis.

Further improvements have been carried out in the Special Schools and alterations are almost complete at the Highfield School. Contracts have been invited for the new school for the deaf and it is expected that building will commence very shortly.

Extensive alterations are being carried out to the dental department at the Central School Clinic. Plans have also been submitted for alterations to the Manor and Heeley dental clinics.

The investigation into morbidity and absenteeism amongst school children by the Ministries of Health and Education was completed during the year.

The School Health Service continues to take an active share in the Royal College of Physicians investigation into rheumatism.

These are some of the salient features in the year's work of the School Health Service. The account of the general activities which follows whilst unspectacular is indicative of the measure of help continuously given to the City's children.

This is the last occasion on which I shall be able to acknowledge the support and consideration shown by the Chairman and Members of the Committee in the welfare of the children. It is with feelings of regret therefore that I view my departure from Sheffield, bearing in mind also the personal kindness and help extended to me for which I now take the opportunity of expressing my grateful thanks.

I acknowledge also with pleasure the consideration and valued help of Mr. Moffett, the Director of Education, and the staff of the various departments, their help in the preparation of certain sections of the report, and Dr. Roberts, the Medical Officer of Health for certain vital statistics, and the keenness and loyal collaboration of the staff of the School Health Service during my term of office.

H. M. COHEN,
School Medical Officer.

March, 1949.

CLINICS

Clinic	No. of Schools	No. of Depts.	Work undertaken
Central School Clinic, 7, Leopold Street	142	216	Administrative centre of school health service. Centre for examination of special cases, ophthalmic, orthoptic, ear, nose and throat, skin, orthopædic, heart and chiropody clinics (specialists). Central inspection, minor ailment, and immunization clinics.
Child Guidance Clinic, 9, New- bould Lane	142	216	Child Guidance.
Speech Therapy Clinic, 9, New- bould Lane	142	216	Speech Therapy.
DISTRICT MEDICAL CLINICS.			
Central School Clinic, 7, Leopold Street :—			
District E	21	28	Inspection, minor ailment and immunization clinics.
District F	22	26	
Attercliffe Branch Clinic, Vicar- age Road	11	18	
Pitsmoor Branch Clinic, Elles- mere Road County School ..	12	23	
Hillsborough Branch Clinic, Broughton Road	16	25	
Heeley Branch Clinic, Lowfield County School.	24	34	
Handsworth Branch Clinic, Hall Road, Handsworth	4	8	
Woodhouse Branch Clinic, Bal- moral Road, Woodhouse ..	2	4	
Shiregreen Branch Clinic, Shire- green County School	8	14	
Manor Branch Clinic, Prince Edward County School ..	11	19	
Wisewood Branch Clinic, Wise- wood County School	5	7	
Wybourn Branch Clinic, Wy- bourn County School	4	5	
Southey Green Branch Clinic, Southey Green County School	2	5	
DENTAL CLINICS :—			
Central School Clinic, 7, Leopold Street	36	43	Routine dental treatment and dental treatment of casual cases.
Owler Lane Branch Clinic, Owler Lane County School	12	22	
Western Road Branch Clinic, Western Road County School	11	18	
Attercliffe Branch Clinic, Vicar- age Road	12	21	
Manor Branch Clinic, Prince Edward County School ..	16	28	
Hillsborough Branch Clinic, Broughton Road	18	27	
Heeley Branch Clinic, Lowfield County School	26	35	
Southey Green Branch Clinic, Southey Green County School	4	10	
Hatfield House Lane Branch Clinic, Hatfield House Lane County School	7	12	

ATTENDANCES AT CLINICS

	Atter-cliffe	Pits-moor	Hills-boro'	Heeley	Central (E)	Central (F)	Handsworth	Woodhouse	Shiregreen	Manor	Wisewood	Southey Green	Wyburn	Special Depts.	Total
Inspection Clinic ..	7,113	3,773	3,780	3,685	2,230	3,617	968	786	4,081	4,739	1,602	1,217	2,889	—	40,480
Minor Ailments Clinic ..	4,592	6,866	2,706	2,922	2,537	1,835	599	305	3,053	4,422	1,138	410	1,594	—	32,979
Child Guidance Clinic ..	—	—	—	—	—	—	—	—	—	—	—	—	—	3,422	3,422
Speech Therapy Clinic ..	—	—	—	—	—	—	—	—	—	—	—	—	—	2,411	2,411
Treatment Clinics—															
Ophthalmic ..	—	—	—	—	—	—	—	—	—	—	—	—	—	11,056	11,056
Aural ..	—	—	—	—	—	—	—	—	—	—	—	—	—	733	733
Dental (Central & Branch)	—	—	—	—	—	—	—	—	—	—	—	—	—	30,562	30,562
Orthopædic ..	—	—	—	—	—	—	—	—	—	—	—	—	—	1,046	1,046
Rheumatism & Heart ..	—	—	—	—	—	—	—	—	—	—	—	—	—	517	517
Immunization ..	—	—	—	—	—	—	—	—	—	—	—	—	—	6,660	6,660
Chiropody	—	—	—	—	—	—	—	—	—	—	—	—	—	1,075	1,075
Dressings by School Nursing Sisters—															
Eye cases ..	761	996	485	1,079		882	190	131	622	1,402	661	496	253	2,803	10,761
Ear cases ..	2,001	1,942	1,003	2,610		1,962	243	287	1,905	1,210	580	889	835	5,054	20,521
Minor surgical cases ..	8,392	6,395	6,250	5,743		6,439	1,221	2,374	6,869	9,095	3,853	6,340	4,591	35,889	103,451
	22,859	19,972	14,224	16,039		19,502	3,221	3,883	16,530	20,868	7,834	9,352	10,162	101,288	265,674

STAFF

Mr. J. Duncan Gray was appointed an additional part-time Ear, Nose and Throat Specialist in January.

The new part-time appointment of consultant for orthodontics was filled by Mr. J. H. Gardiner in April. In January Mr. Aldam took up his part-time appointment as chiropodist.

There have been several changes amongst the general staff of the Service.

Dr. Lindsay Williams, Assistant School Medical Officer, and Mr. A. G. Oldale, School Dental Surgeon, resigned in November.

Sister Sempers retired in December, 1948, on superannuation after 27 years of excellent service to the Authority. There have been various resignations and replacements amongst the School Nursing Sisters and Nursing Assistants and at the end of the year there were three vacancies for School Nursing Sisters. Miss K. Grayson took up her appointment as Matron at Bents Green School in January.

One new dental attendant was appointed during the year.

Miss C. J. Collier and Miss B. Worrall, Speech Therapists, resigned in September and Miss D. M. Gostelow and Mrs. J. B. Pepperell were appointed to fill these vacancies in November.

Miss B. Bernthal was appointed an additional Educational Psychologist in September.

CO-ORDINATION

A full review of the inter-availability services between the Public Health Department and the School Health Service has been given previously.

Treatment of pre-school children at the various school clinics :—

Treatment given—	Cases.	Attendances.
Dental	175	189

Treatment of pupils from the Junior Occupation Centre :—

Treatment given—	Cases.	Attendances.
Dental	1	1

Treatment of Mental Welfare patient :—

Treatment given—	Cases.	Attendances.
Dental	1	1

EFFECT OF THE ESTABLISHMENT OF THE NATIONAL HEALTH SERVICE ON THE SCHOOL HEALTH SERVICE

The integration of the School Health Service with the facilities to be provided by the proposed National Health Service was foreshadowed in Circular 29 of the Ministry of Education in March, 1945. After advocating extensions and consolidation of the School Medical Service the Ministry emphasised that “ these suggestions are made with a view to purely interim arrangements and without prejudice to any ultimate decision which may be reached in regard to the National Health Service.” In Administrative Memorandum 68 of June, 1945, this point is again maintained.

Circular 179 of the Ministry of Education dated 4th August, 1948, dealt with the procedure which could be adopted by Local Education Authorities following the establishment of the National Health Service, regarding the School Health Service. The Circular envisaged "financial and structural changes."

The effects can be discussed under the following sections.

CONSULTATION AND SPECIALIST TREATMENT

The Committee have always given careful consideration to the staffing of the Specialist Clinics. Paragraph 4 of Circular 179 which follows is indicative of the concern which is felt generally.

"Local Education Authorities should outline the needs arising from the School Health Service to the Regional Hospital Boards without delay and in particular discuss with them bringing the work at present directly provided by the School Health Service within the plans which the Boards are now formulating so that it may take its place as part of the Hospital and Specialist Services. The Boards have to determine what specialist services are to be available, and in what form, for the population as a whole under Section 3 (1) (c) of the National Health Service Act, but where the service which they provide is for the benefit of school children, towards whom Local Education Authorities have special responsibilities, they will plan the future organisation and development of the work as far as possible in consultation and agreement with Authorities."

The requirements of the School Health Service were duly placed before the Regional Hospital Board and discussed by the Director of Education and School Medical Officer with the Senior Administrative Medical Officer.

It is very gratifying to note therefore that the Medical Officer stated that in appointing specialists for service in collaboration with the School Health Service it was his desire that the Education Committee should suggest the specialist they desire rather than the Board should appoint a specialist and inform the Committee of the decision. He was anxious that there should be the closest consultation between the Board and the Education Committee.

Agreement was reached over the retention of the specialists attending the Committee's Clinics as follows :—

EAR, NOSE AND THROAT CLINIC.

Mr. J. H. Cobb and Mr. J. D. Gray, each attends this Clinic on one session per week. This service will be taken over by the Regional Hospital Board as from 5th July, 1948, and continue to be conducted at the Central School Clinic, Leopold Street.

ORTHOPÆDIC CLINIC.

Mr. F. W. Holdsworth (on occasion the Orthopædic Registrar at the Sheffield Royal Infirmary attends) and Mr. A. Dornan each visit the Clinic on one session in alternate weeks.

This service will fall under the same arrangements as those made for the Ear, Nose and Throat Clinic, indicated above.

In addition the Regional Hospital Board will be responsible for the cost of all surgical appliances and orthopædic alterations.

RHEUMATISM AND HEART CLINIC.

Dr. S. Gordon visits the Clinic on one session per week. This service will be taken over by the Regional Hospital Board and continue to be conducted at the Central School Clinic. As Dr. Gordon is at present employed full time by the Children's Hospital Board of Governors it will be necessary for arrangements to be made for financial adjustment between the Regional Hospital Board and the Board of Governors.

PSYCHIATRIST AT CHILD GUIDANCE CENTRE.

Dr. R. Warnecke attends on eight sessions per week. The Ministry of Education Circular 179 enlarges on the various facilities required for Child Guidance which may differ according to locality.

Sheffield, however, has always enjoyed the services of a psychiatrist at the Child Guidance Centre, recognising that the staff is essentially a team with psychiatrist and psychologist working in close co-operation.

Accordingly the Regional Hospital Board will take over financial responsibility for psychiatric treatment at the Child Guidance Centre as from 5th July, 1948, and continue to make available at the Centre the services of a psychiatrist on eight sessions per week.

OPHTHALMIC CLINIC.

The Education Committee employ a full time ophthalmologist, Mr. M. Ferguson. Since July, 1948, the Committee have used the Supplementary Ophthalmic Services in accordance with Administrative Memorandum No. 294 (August, 1948), and Administrative Memorandum No. 303 (October, 1948). Payment is made for each child refracted, the fee being handed over to the Education Committee who are still responsible for the ophthalmologist's salary. No payment is made for re-inspection cases. Spectacles are provided without cost to the Committee or parent.

In accordance with Administrative Memorandum No. 303 the Regional Hospital Board, however, will take over the ophthalmic specialist as from a date to be agreed, and also one nurse. The present arrangements for the examination and treatment of children will continue at the Central School Clinic, Leopold Street. The Board will accept financial responsibility for the use of the clinic premises and equipment, the terms to be agreed. New equipment required will be provided by the Regional Hospital Board, provided it is used exclusively for the service for which they are responsible.

Mr. Ferguson at the present time visits the School for the Blind and the Partially Sighted Class at Bents Green Special School on about six

sessions per annum. As the duties which he undertakes are in connection with the responsibilities of the Education Committee in the conduct of Special Schools, Mr. Ferguson will continue to pay these visits and the Education Committee will be financially responsible for his services. The Education Committee will make a payment, to be agreed, to the Board for these services.

Under the Supplementary Ophthalmic Services scheme the parent can take the child's prescription to any optician. Previously under the Committee's scheme the spectacles were dispensed by one firm of opticians and it was administratively simple to recall the patient for checking the prescription and trial of fit when the spectacles were made up. Under the present scheme it will be appreciated that the recall of the patient to the Clinic after obtaining the glasses depends on the co-operation of the patient. When the Regional Hospital Board take over, however, presumably spectacles will again be dispensed by one firm and this difficulty will be resolved.

The Committee have recently appointed an orthoptist (to fill a vacancy) for seven sessions per week and the Regional Hospital Board have agreed to assume responsibility for this service.

X-RAY TREATMENT OF RINGWORM.

Dr. H. R. Vickers was responsible to the Committee for the treatment of ringworm of the scalp. This service however will be taken over by the Regional Hospital Board as from 5th July, 1948. As the x -ray treatment is given at one of the Teaching Hospitals it will be necessary for the Board to make the necessary arrangements with the Hospital Board of Governors.

HOSPITAL TREATMENT

The financial responsibility which had been accepted by the Committee described in the Report for 1947 for all in-patients and out-patients in the hospitals in the City of Sheffield of children in attendance at schools maintained by the Committee, subject in each case to the approval of the School Medical Officer, ceased on 5th July, 1948, in accordance with the terms of the National Health Service Act.

Fortunately, however, the arrangements which were made to enable the School Health Service to obtain a full and continuous medical history of the City's school children are continued. The hospitals continue to send to the School Medical Officer a copy of the report on a child after being seen in out-patients or on discharge from in-patient treatment.

CONVALESCENT TREATMENT

As very few of the convalescent homes for children have been taken over by the Regional Hospital Boards the Committee still meet the cost of the majority of the children sent for this treatment by the Consultants at the Hospitals and approved by the School Medical Officer.

SCHOOL MINOR AILMENT AND INSPECTION CLINICS

There was a falling off in the attendances at these clinics for a few months after 5th July, 1948, but the numbers then increased to a figure rather above the average rate.

SCHOOL DENTAL CLINICS

It is laid down in Circular 179 that it is still the responsibility of the Education Committee to secure a comprehensive dental service for school children. An increase in the numbers attending as "casuals" has been reported since 5th July.

ORTHODONTICS

The Committee appointed a Consultant Orthodontist, Mr. J. H. Gardiner, to attend on one session per month. As the responsibility of maintaining a comprehensive dental service continues to fall on the Committee the cost of the Orthodontist will be borne by the Committee in the usual way.

ASH HOUSE SCHOOL

The Regional Hospital Board deemed this school for rheumatic children to be a "Hospital School" and have accordingly appropriated the school and part of the site. The Minister of Health was of the opinion that the transfer of these premises was necessary for the purpose of providing hospital and specialist services. Hence, in spite of representations by the Committee, he was unable to agree to disclaim the premises. The Committee are to act as agents until the end of March, 1949.

ACKNOWLEDGMENTS

The School Medical Officer wishes to record his appreciation of the help and co-operation received from the following who are all in some way now connected with the smooth running of the School Health Service :—The Senior Administrative Medical Officer of the Regional Hospital Board and his medical assistants ; The Secretary of the Board ; The Chief Administrative Officer of the United Hospital Board ; The Secretaries of the No. 2 and No. 3 Hospital Management Committees and the Secretary and Treasurer of the Local Executive Council.

MEDICAL INSPECTION

In accordance with the School Health Service Regulations 1945, arrangements have been made for the medical inspection of pupils :—

- (a) as soon as possible after the date of their admission to a maintained school for the first time ;
- (b) during the last year of their attendance at a maintained Primary School ;
- (c) during the last year of their attendance at a maintained Secondary School.

The parents are invited to attend the examinations and their interest and appreciation of a "medical audit" is shown by the large numbers attending the examinations.

The main statistics on medical inspection will be found on pages 78-82, and the findings are given in accordance with the Ministry's requirements.

The number of children (1947 figures in brackets) found to require treatment at the routine examination for various defects was 1,465 (1,433). In addition 1,546 (1,624) were referred for further medical supervision.

At the "follow up" examinations, which take place approximately six months after the routine medical inspections, 5,470 (5,811) children were examined.

There were 1,880 (2,327) cases selected at the survey inspection and 594 (707) were found to require treatment.

The percentage of the three routine medical inspection groups referred for treatment (excluding defects of nutrition, uncleanliness and dental diseases) were as follows :—

Entrants	9.34
2nd Group	7.75
3rd Group.. .. .	8.10
Total for all three groups	8.44

GENERAL CONDITION

ASSISTANT SCHOOL MEDICAL OFFICERS' REPORTS

"In general the standard of health appears to have been maintained. No doubt the school meals and milk help to account for this.

The period during the war of lack of parental control and discipline have passed and there appears to be greater tranquillity in the homes."

"I believe the general standard of health of the school children has been good during the past 12 months. I feel certain that we are seeing fewer cases of general debility and also skin conditions than in previous years."

"The general health of the children is well maintained. The main infectious disease encountered has been measles and to a much lesser degree scarlet fever. I have not found any of the usual sequelæ in children I have examined."

CLASSIFICATION OF CHILDREN UNDER THE HEADING "GENERAL CONDITION" ON THE SCHOOL MEDICAL RECORD CARD.

The doctors are asked to classify the children into three classes under this heading : good and poor with an intermediate standard fair according to the examining medical officer's general impression of the child's physical fitness.

As the findings were made on the same standard as last year a comparison is shown below.

Indications for a revision of these groupings were received from the Ministry during the year and will be incorporated in the Report for next year.

A comparison of the findings would seem to indicate that on the whole the general condition in these age groups of the children have been well maintained although again the writer must emphasise that the assessment is clinical and individually subjective in its approach.

Age Groups	Year	Number examined	Good Per cent.	Fair Per cent.	Poor Per cent.
Entrants	1947	6,355	57·50	39·73	2·72
	1948	6,751	50·67	47·39	1·94
Intermediates	1947	4,674	59·05	38·51	2·44
	1948	6,913	55·58	42·24	2·18
Leavers	1947	2,920	68·84	27·36	3·80
	1948	3,676	66·46	32·89	0·65
TOTAL FOR ALL THREE GROUPS	1947	13,949	60·39	36·76	2·85
	1948	17,340	55·98	42·26	1·76

HEIGHTS AND WEIGHTS

The anthropometric examinations of the children have been undertaken during the year in increasing numbers. The measurements given in the following tables show how far the “averages” have been maintained by comparison with previous years. Of more importance, however, is the growth rate of each individual child which is shown by the regular measurements on his chart and available for the school medical officer. For example, measurement on a single occasion—the “static” measurement—gives no indication of the genetic factors concerned. In other words the subject, as has been stated previously, may be the light jockey type or the heavy-weight boxer type.

Bearing these points in mind a comparison has been made between the measurements of the various age groups for boys and girls for this year and last year. The measurements appear in the accompanying tables.

Whilst the Board of Education norms for 1928 are also given they must be used with some caution for comparative purposes. The Board’s table for the five year old group, for example, is compiled from data grouped round children aged four years six months and over, but under five years six months. The Authority’s figures for this group, however, are based on children over five years but under six years. The range is similar for all the other age groups.

In the main the subjective findings of the school medical officers are corroborated as, generally speaking, the heights and weights have improved compared with the previous year’s measurements. Unfortunately, however, it has not been possible this year to estimate whether these differences are statistically significant.

HEIGHTS

SHEFFIELD PRIMARY AND SECONDARY SCHOOLS (OTHER THAN GRAMMAR SCHOOLS)

BOYS										GIRLS								
Age	Board of Education Standard 1928 Inches	1920 Inches	1928 Inches	1938 Inches	1946 Inches	1947 Inches	1948 Inches	No. Exam-ined 1948		Age	Board of Education Standard 1928 Inches	1920 Inches	1928 Inches	1938 Inches	1946 Inches	1947 Inches	1948 Inches	No. Exam-ined 1948
5	41.4	40.5	41.3	42.44	42.78	43.45	43.84	249		5	41.1	40.75	41.5	42.13	42.47	42.91	43.32	223
6	43.0	42.75	44.6	44.76	45.05	44.81	45.13	1657		6	42.8	42.45	43.4	44.25	44.73	44.67	44.85	1544
7	45.4	44.4	45.85	47.09	46.84	47.12	47.39	1789		7	45.1	44.05	46.1	46.77	46.81	46.75	47.04	1766
8	47.8	46.9	48.3	49.21	50.03	49.29	49.49	2064		8	47.5	46.9	47.85	48.86	49.59	49.05	49.20	1882
9	49.2	48.45	49.7	50.47	51.72	51.20	51.51	2183		9	48.9	47.95	49.9	50.39	52.10	50.88	51.16	2435
10	51.3	49.8	50.55	52.28	54.13	53.15	53.22	2189		10	51.2	50.25	50.75	52.13	53.06	52.93	53.11	2004
11	52.7	53.55	52.6	53.98	57.23	54.67	55.00	1870		11	52.8	51.1	53.5	55.28	56.80	54.93	55.25	1747
12	55.0	54.05	55.1	56.42	57.30	56.38	56.90	1425		12	55.6	54.5	56.5	57.52	58.14	57.31	57.52	1349
13	56.2	55.7	56.2	57.91	58.89	58.92	58.81	1542		13	56.9	56.05	57.6	58.9	59.64	59.28	59.69	1456
14	58.0	56.45	57.9	59.8	60.69	60.39	61.49	1445		14	58.9	57.0	58.3	60.75	60.65	60.53	61.23	1481

WEIGHTS

SHEFFIELD PRIMARY AND SECONDARY SCHOOLS (OTHER THAN GRAMMAR SCHOOLS)

BOYS										GIRLS								
Age	Board of Education Standard 1928 Pounds	1920 Pounds	1928 Pounds	1938 Pounds	1946 Pounds	1947 Pounds	1948 Pounds	No. Examined 1948		Age	Board of Education Standard 1928 Pounds	1920 Pounds	1928 Pounds	1938 Pounds	1946 Pounds	1947 Pounds	1948 Pounds	No. Examined 1948
5	38.7	38.6	42.65	41.49	41.48	43.45	45.24	249		5	37.5	38.9	38.8	39.93	40.03	41.03	43.41	223
6	41.3	42.2	44.6	45.72	46.09	45.53	47.33	1657		6	40.1	40.45	42.3	43.87	44.49	44.65	45.64	1544
7	45.4	45.1	48.2	51.1	50.38	50.81	52.36	1789		7	44.4	42.1	47.7	49.12	48.49	48.81	50.60	1766
8	51.0	50.15	53.3	56.17	58.74	56.47	58.03	2064		8	49.4	49.05	51.8	54.17	56.78	54.56	56.04	1882
9	54.8	52.25	57.75	60.0	63.68	62.04	63.67	2183		9	52.6	52.2	55.65	58.0	65.00	60.14	61.11	2435
10	59.6	57.7	60.65	64.29	70.33	67.52	69.00	2189		10	59.8	53.4	59.5	63.8	67.64	66.32	67.99	2004
11	64.6	68.2	64.9	70.86	83.78	72.86	75.05	1870		11	63.9	61.75	70.95	75.44	78.16	73.11	75.22	1747
12	71.6	70.4	74.95	80.14	82.76	80.07	82.50	1425		12	73.9	71.05	77.5	83.47	84.29	82.99	85.01	1349
13	76.5	73.75	80.0	85.61	89.48	89.49	90.92	1542		13	79.0	77.35	83.4	89.66	94.35	93.38	95.61	1456
14	86.1	79.55	84.4	94.14	96.96	97.31	103.18	1445		14	88.2	78.95	90.0	100.5	101.12	100.22	106.46	1481

SCHOOL MEALS

A full description of the arrangements for school meals has been given in previous reports. The dietetic principles remain of foremost importance and need no emphasis in view of the full discussion in preceding reports.

The following statistics for the year are indicative of the continued high proportion of children partaking of school meals.

Particulars of the average number of meals supplied daily in respect of each calendar month from January to December, 1948 :—

1948	Primary and Secondary Schools		Grammar Schools		Totals
	Free	Paid	Free	Paid	
January	3,440	32,903	151	5,990	42,484
February	3,567	32,874	156	6,270	42,867
March	3,711	32,727	165	6,293	42,896
April	3,844	33,062	168	5,888	42,962
May	3,910	32,976	165	5,971	43,022
June	3,902	33,021	166	5,991	43,080
July	3,900	33,010	168	6,010	43,088
August†	—	—	—	—	—
September	3,892	33,021	169	6,034	43,116
October	3,869	33,020	156	6,077	43,122
November	3,870	33,168	164	6,172	43,374
December	3,861	32,928	158	6,187	43,134*

* Daily average attendance during this period was 64,054 (November, 64,855).

† All schools closed during August, except for holiday meals.

	1946	1947	1948
Number of dinners supplied on payment ..	5,752,761	6,552,164	7,546,019
Number of dinners supplied free	1,176,008	887,248	766,601

The number of children on free meals in December of the following years is also given for comparison :—

1942	1943	1944	1945	1946	1947	1948
3,100	4,200	5,064	5,712	5,968	3,842	4,347

MEALS DURING SCHOOL HOLIDAYS

Meals are supplied during all holidays but as the numbers who indicate their desire to attend are comparatively small, certain kitchens only in suitable centres remain open.

The holiday figures for 1948 are shown below :—

Holiday Period	Percentage of usual demand	Average daily attendance
Easter	7·4	3,527 (1,408 free)
Whitsuntide ..	5·0	2,398 (1,075 free)
Midsummer ..	7·2	3,372 (1,369 free)
Christmas	4·6	2,355 (1,150 free)

PROVISION OF MILK

The high percentage of children partaking of milk has been well maintained. It is a pleasure to acknowledge the help and encouragement given by teachers who work hard to make the scheme effective.

The following information gives the number of bottles of milk, free of charge to all children requiring it, supplied daily to school children each month for 1948. The supply at present is limited to one one-third pint bottle per day for each child.

1948	Primary and Secondary Schools	Grammar Schools	Totals
January	56,832	3,646	60,478
February	56,849	3,634	60,483
March	56,771	3,822	60,593
April	58,136	3,989	62,125
May	59,093	4,020	63,113
June	59,103	4,001	63,104
July	59,125	4,013	63,138
August†	—	—	—
September	59,275	4,147	63,422
October	59,919	4,087	64,006
November.. .. .	59,490	4,533	64,023
December	59,437	3,598	63,035*

* Daily average attendance during this period was 64,054 (November, 64,855).

† All schools closed during August.

The number of children receiving milk on one day during the week commencing 11th October, 1948, in all schools except special schools was 63,060. The average attendance in such schools was 66,520 so that 94·8 per cent. of the children received milk on that day.

During the year ended 31st December, 1948, 12,327,741 one-third pints of beverage milk, representing 513,656 gallons, were supplied to pupils in Sheffield Schools.

All milk supplied to the schools is pasteurized.

The following extract from the Ministry of Education Statistical Return of meals and milk for a day in October, 1948, is also of sufficient interest to be placed on record.

PRIMARY SCHOOLS		SECONDARY SCHOOLS	
Percentage of those present who received—		Percentage of those present who received—	
Milk	Dinners	Milk	Dinners
Sheffield 97·4	56·5	86·6	74·2

CLEANLINESS

The figures obtained from inspection at the routine examinations, following due notice to the parents, are given below, and show a gratifying improvement on last year's figures. The subject is also dealt with on page 54 in the section dealing with the work of the nursing staff. This relates to findings during the unannounced cleanliness surveys and again the figures are an improvement over the comparable figures for last year.

It would appear that the unremitting attention given to this aspect of personal hygiene is responsible for this improvement. The methods employed have been fully described in previous reports but it is opportune to mention here the co-operation and help given by the teachers in their concern over personal hygiene.

CLEANLINESS OF HEAD

				CLEAN per cent.	NITS per cent.	LICE per cent.
Boys	..	1937	..	98.48	1.49	0.02
		1947	..	94.61	5.02	0.37
		1948	..	97.52	2.48	--
Girls	..	1937	..	87.96	12.0	0.03
		1947	..	84.58	13.58	1.84
		1948	..	88.35	11.61	0.04

CLEANLINESS OF BODY

				CLEAN per cent.	DIRTY per cent.	BODY LICE per cent.
Boys	..	1937	..	99.86	0.13	0.01
		1947	..	99.02	0.92	0.06
		1948	..	99.80	0.20	—
Girls	..	1937	..	99.9	0.1	—
		1947	..	99.42	0.55	0.03
		1948	..	99.57	0.43	—

BATHS AND CLEANSING

The shower baths at Maltby Street and Whitby Road Schools have served the children from the schools in the neighbourhood. The children at Wincobank School continue to use the shower baths at Wincobank Bath.

HYGIENE OF SCHOOL BUILDINGS

At the close of the routine medical inspection the school medical officers make an examination of the hygienic condition of the schools. Any structural defects are reported and any environmental problems such as the position of desks in relation to lighting are discussed with the teachers.

During the year the following additions, and alterations and improvements to buildings were effected.

WORK COMPLETED

Abbeydale Grammar School ..	Stage 3 of rehabilitation after war damage.
Abbeydale County School ..	Rehabilitation after war damage.
Burngreave County School ..	Rehabilitation after war damage.
Carbrook C.E. School	Provision of wash-up kitchen.
City Grammar School	Replacement of old hot-air heating system by electric heating.
Marlcliffe Secondary School ..	Extension to kitchen.
Nether Edge Grammar School	Rehabilitation of house for Caretaker and adaptations of quarters for staff.
St. Silas' C.E. School	Provision of canteen scullery.
Wadsley Bridge Special School	Provision of practical room and kitchen and conversion of existing hut to a dining room.

HUTS FOR KITCHEN-DINING-ROOMS FOR SCHOOL MEALS.**COMPLETED—**

Meynell Road County School.
Heeley Bank County School.

INSPECTION CLINICS

The Inspection Clinics are a very important section of the Service and the parents and children have continued to avail themselves of the facilities at these clinics. During the year 18,255 children were seen compared with 16,040 in 1947.

The purpose and function of the Inspection Clinics have been fully described in previous reports and the accompanying tables record the nature of the consultations during the year.

It must be emphasised, however, that the number of consultations at each clinic is not an absolute measure of the defects in these localities. Children may attend other agencies for consultation and treatment and these of course will not appear in the table.

INSPECTION CLINICS.

Condition	Atter-cliffe	Pits-moor	Hills-borough	Heeley	Central (E)	Central (F)	Hands-worth
Malnutrition	5	83	—	1	1	—	—
Eye—							
Defective vision	127	105	124	149	99	124	33
Squint	22	27	10	25	24	10	11
Other conditions	6	24	—	—	—	—	2
Ear—							
Defective hearing	14	15	10	43	15	10	16
Other ear diseases	3	4	—	—	—	—	—
Nose and throat—							
Chronic tonsillitis	38	73	23	58	98	57	7
Adenoids	4	13	3	5	2	1	6
Chronic tonsillitis and adenoids	35	16	23	3	21	22	4
Other conditions	962	559	296	189	89	108	75
Cervical glands	98	59	19	36	12	11	4
Defective speech	6	21	10	13	4	8	2
Teeth	24	40	4	5	10	4	7
Heart and circulation—							
Heart disease	17	19	10	12	8	8	3
Anæmia	5	10	3	15	2	2	1
Rheumatism	7	31	13	46	29	16	11
Debility	209	133	220	109	163	120	48
Lungs	184	125	160	119	87	76	46
Tuberculosis—							
Pulmonary—							
Definite	—	1	2	—	1	—	—
Suspected	—	1	8	17	6	3	—
Non-Pulmonary—							
Glands	1	—	1	3	3	3	3
Bones and joints	—	1	4	3	9	2	5
Skin	1	—	—	—	—	—	—
Other forms	—	—	—	1	2	—	—
Nervous system—							
Epilepsy	8	5	3	5	3	9	1
Chorea	—	1	4	—	10	9	—
Other conditions	37	12	7	90	10	10	5
Orthopædic—							
Posture	1	5	—	5	—	—	—
Flat foot	5	8	9	19	10	7	12
Other	241	97	30	200	70	68	28
Developmental—							
Hernia	10	13	—	4	—	—	1
Other	18	4	2	6	—	—	6
Psychological—							
Development	4	4	1	17	8	18	2
Stability	7	26	22	3	15	23	2
Infectious diseases	126	64	36	28	97	127	8
Post diphtheria	1	3	1	2	4	2	—
Diphtheria contacts	11	14	11	10	32	8	2
Post scarlet fever	66	79	66	141	71	75	33
Other defects and diseases	464	389	172	288	94	191	53
No appreciable defect	125	159	194	123	170	211	60
Cases	2,892	2,243	1,501	1,793	1,279	1,343	497
Examinations	7,113	3,773	3,780	3,685	2,230	3,617	968

Wood-house	Shire-green	Manor	Wise-wood	Southey Green	Wy-bourn	Total	Condition
—	1	—	2	—	—	93	Malnutrition.
10	88	46	54	31	28	1,018	Eye—
5	17	13	13	11	11	199	Defective vision
—	—	—	—	—	—	32	Squint
—	—	—	—	—	—	—	Other conditions
1	24	40	4	3	5	200	Ear—
—	—	—	—	—	—	7	Defective hearing
—	—	—	—	—	—	—	Other ear diseases
23	36	30	9	5	4	461	Nose and Throat—
—	5	9	1	1	2	52	Chronic tonsillitis
—	—	—	—	—	—	—	Adenoids
4	61	144	2	18	7	360	Chronic tonsillitis and adenoids
40	231	219	104	53	526	3,451	Other conditions
7	33	65	8	6	33	391	Cervical glands
—	8	13	3	2	2	92	Defective speech
2	30	35	5	7	4	177	Teeth
—	—	—	—	—	—	—	Heart and circulation—
2	35	11	3	22	4	154	Heart disease
—	2	8	4	1	—	53	Anæmia
13	26	9	17	9	18	245	Rheumatism
112	77	177	16	46	183	1,613	Debility
27	201	134	32	67	67	1,325	Lungs
—	—	—	—	—	—	—	Tuberculosis—
—	1	—	—	2	—	7	Pulmonary—
—	2	1	1	2	2	43	Definite
—	—	—	—	—	—	—	Suspected
—	1	2	—	—	—	17	Non-Pulmonary—
—	7	1	—	1	2	35	Glands
—	—	—	—	—	—	1	Bones and joints
—	—	—	—	—	—	3	Skin
—	—	—	—	—	—	—	Other forms
1	4	6	2	2	4	53	Nervous system—
—	5	2	2	1	1	35	Epilepsy
3	91	35	1	18	4	323	Chorea
—	—	—	—	—	—	—	Other conditions
—	1	2	—	—	—	14	Orthopædic—
2	12	5	5	6	5	105	Posture
4	111	274	75	25	4	1,227	Flat foot
—	—	—	—	—	—	—	Other
—	3	7	—	—	—	38	Developmental—
—	2	—	—	—	—	38	Hernia
—	—	—	—	—	—	—	Other
—	1	2	3	2	2	64	Psychological
1	10	12	7	1	2	131	Development
18	45	77	11	34	59	730	Stability
—	1	4	3	—	—	21	Infectious diseases
2	15	18	3	1	1	128	Post diphtheria
10	29	64	24	10	7	675	Diphtheria contacts
31	516	367	122	107	253	3,047	Post scarlet fever
26	95	189	64	26	155	1,597	Other defects and diseases
—	—	—	—	—	—	—	No appreciable defect
344	1,827	2,021	600	520	1,395	18,255	Cases
786	4,081	4,739	1,602	1,217	2,889	40,480	Examinations

MINOR AILMENTS AND DISEASES OF THE SKIN

Treatment is given for a variety of minor ailments at the various clinics as is shown in the accompanying table. Certain conditions call for special comment.

SCABIES

The number of cases during the year showed a further dramatic fall. The figures for 1946 were 1,284, for 1947, there were 641 and for the year under review 272 cases were seen. The reason for the rise of the incidence of scabies prior to the war reaching its maximum in 1942 with 2,657 cases and declining since, remains inexplicable. Similar waves have been noted previously, and it is to be hoped that the decrease will continue still further.

The Committee's scheme, operating in conjunction with the Public Health Department and offering treatment to all infected members of households continues to work satisfactorily.

RINGWORM OF THE SCALP

There was a further welcome decrease in the number of cases discovered during the year—nine—as compared with 13 in 1947. Dr. H. R. Vickers treated one case with x rays in accordance with the Committee's arrangements. There was one case under treatment at the end of the year.

DISEASES OF THE SKIN

The number of cases of impetigo in the group showed a fall compared with last year—375—as compared with 573, but other diseases of the skin show an increase after marked decreases in the past two years.

MINOR AILMENT CLINIC

Condition	Atter-cliffe	Pits-moor	Hills-boro'	Heeley	Central (E)	Central (F)	Handsworth	Woodhouse	Shiregreen	Manor	Wisewood	Southey Green	Wybourn	Total
EYE—														
Blepharitis ..	32	64	80	32	25	21	10	10	27	115	21	3	10	450
Conjunctivitis ..	117	118	66	81	37	43	11	2	55	99	54	6	21	710
Corneal opacities ..	1	—	—	—	1	1	—	—	—	4	—	—	13	20
Other conditions ..	117	134	113	122	24	16	18	5	92	24	60	12	3	740
EAR—														
Discharging ears ..	92	88	40	56	64	20	32	15	45	77	10	16	29	584
Otitis media ..	28	6	13	1	2	17	—	—	22	10	2	3	16	120
Other diseases ..	154	185	185	153	53	63	19	13	132	84	46	16	1	1,104
SKIN—														
Ringworm—Scalp ..	—	2	1	1	1	—	—	—	—	4	—	—	—	9
Body ..	10	8	5	6	8	5	3	3	10	8	1	2	4	73
Scabies ..	50	51	25	22	6	16	2	1	37	34	3	10	15	272
Impetigo ..	53	154	92	8	7	7	1	—	17	9	18	5	4	375
Sore head ..	123	149	18	15	33	11	4	2	3	28	—	3	26	415
Other diseases ..	495	492	287	719	248	130	81	29	190	307	157	33	17	3,185
Miscellaneous—														
(e.g., Minor injuries, bruises, sores, chilblains, etc.) ..	1,315	828	877	984	1,093	635	244	123	1,139	1,940	402	122	714	10,416
No appreciable defect ..	29	26	12	19	15	4	6	8	13	8	—	—	32	172
Cases ..	2,616	2,305	1,814	2,219	1,617	989	431	211	1,782	2,751	774	231	905	18,645
Examinations ..	4,592	6,866	2,706	2,922	2,537	1,835	599	305	3,053	4,422	1,138	410	1,594	32,979

EYE DEFECTS

The number of children found to have defective vision at the routine examinations is set out in the table below :—

				Number examined.	Normal vision per cent.	Defective vision. per cent.
<i>Entrants.</i>						
Boys	..	..	3,106 out of 3,494	..	96·82	.. 3·18
Girls	..	..	2,872 out of 3,257	..	96·66	.. 3·34
<i>Intermediates.</i>						
Boys	..	..	3,693	..	91·09	.. 8·91
Girls	..	..	3,220	..	89·47	.. 10·53
<i>Seniors or Leavers.</i>						
Boys	..	..	1,850	..	89·40	.. 10·60
Girls	..	..	1,826	..	85·71	.. 14·29

In addition the school nursing sisters test the visual acuity in certain other age groups. They referred 309 children to the medical officers at the clinics and of these 230 were found to require examination by the ophthalmologist, and 79 were kept under observation.

OPHTHALMIC TREATMENT

The total number of cases dealt with in 1948 was 5,968. Of these 1,532 were new cases and the total number of examinations was 11,056. The figures relating to the provision of spectacles are given below :—

Spectacles—

Number of pairs of spectacles prescribed in the school clinics	1,906
Number obtained through the school clinics and passed by the ophthalmologist	1,367

To the 4th July, 1948, 1,387 spectacles of standard frames—steel or shell covered—together with 771 repairs of spectacles have been supplied free of charge.

As from the 5th July, 1948, provision, replacement, and repair of spectacles has been provided through the Supplementary Ophthalmic Services of the National Health Service.

An analysis of the defects found on examination follows :

						Cases.	Attendances.
Hypermetropia	..	..	..	..	..	482	642
Myopia	..	..	..	..	..	728	1,250
Astigmatism, hypermetropic	..	..	..	..	..	2,152	4,517
„ myopic	..	..	..	..	..	333	747
„ mixed	..	..	..	..	..	400	714
Anisometropia	..	..	..	..	..	138	211
Congenital—							
Nystagmus	..	..	..	..	..	17	28
Optic atrophy	..	..	..	..	..	2	2
Ptosis	..	..	..	..	..	6	11
Amblyopia	..	..	..	..	..	54	100
Paralysis of external rectus	..	..	..	..	..	6	9
Epicanthus	..	..	..	..	..	12	23
Cataract	..	..	..	..	..	8	16
Microphthalmia	..	..	..	..	..	1	2
Muscular paresis	..	..	..	..	..	1	1
Remains of hyaloid artery	..	..	..	..	..	1	1
Retinitis pigmentosa	..	..	..	..	..	4	10
Subluxation of lenses	..	..	..	..	..	2	4
Anterior capsular cataract	..	..	..	..	..	4	5
Coloboma of iris choroid	..	..	..	..	..	4	5
Guttate choroiditis	..	..	..	..	..	1	1
Pseudo glioma	..	..	..	..	..	1	1
Macular degeneration	..	..	..	..	..	2	4
Paresis of inferior oblique	..	..	..	..	..	2	2
Aphakia	..	..	..	..	..	1	1
Exophthalmos	..	..	..	..	..	2	2
Posterior polar cataract	..	..	..	..	..	1	1
Retraction syndrome	..	..	..	..	..	1	1
Hole at macula	..	..	..	..	..	1	2
Inflammatory—							
Blepharitis	..	..	..	..	..	8	9
Conjunctivitis acute catarrhal	..	..	..	..	..	21	37
„ phlyctenular	..	..	..	..	..	16	59
Keratitis	..	..	..	..	..	7	19
„ phlyctenular	..	..	..	..	..	7	14
Chalazion	..	..	..	..	..	7	10
Dacryocystitis	..	..	..	..	..	1	1
Hordeolum	..	..	..	..	..	4	8
Iritis	..	..	..	..	..	2	3
Nebulæ	..	..	..	..	..	20	34
Leucoma	..	..	..	..	..	1	1
Phthisis bulbi	..	..	..	..	..	1	1
Enucleation eye	..	..	..	..	..	4	5
Oedema of lids	..	..	..	..	..	1	2
Macular choroiditis	..	..	..	..	..	2	2
Facial paralysis	..	..	..	..	..	1	1
Injuries—							
Foreign body, eye	..	..	..	..	..	6	9
Injury to eye	..	..	..	..	..	4	6
Corneal abrasion	..	..	..	..	..	4	5
Contusion lids	..	..	..	..	..	12	22
Ammonia burn	..	..	..	..	..	1	4
Conjunctival laceration	..	..	..	..	..	2	4
Lime burns	..	..	..	..	..	1	2
Subconjunctival hæmorrhage	..	..	..	..	..	1	1

						Cases.	Attendances.
Injuries (<i>cont.</i>)—							
Abrasion of lids	..	..	..	..	..	1	1
Detached retina	..	..	..	..	..	3	5
Hyphæma	..	..	..	..	..	4	6
Traumatic cataract	..	..	..	..	..	3	3
Squint—							
Strabismus, Convergent (right)	..	..	..	..	..	332	544
.. „ (left)	..	..	..	..	..	387	742
.. Alternating Convergent	..	..	..	..	..	110	273
.. „ Divergent	..	..	..	..	..	9	17
.. Divergent (right)	..	..	..	..	..	12	20
.. „ (left)	..	..	..	..	..	3	7
Cyclophoria	..	..	..	..	..	16	41
Exophoria	..	..	..	..	..	6	8
Convergence insufficiency	..	..	..	..	..	1	1
Heterophoria	..	..	..	..	..	15	35
Orthophoria	..	..	..	..	..	6	13
Not yet diagnosed	..	..	..	..	..	264	353
No defect	..	..	..	..	..	295	415
						5,968	11,056

Mr. Malcolm Ferguson, the Ophthalmologist contributes the following :—

“ For a further year the eye clinic has been without the services of an orthoptist, and occlusions have been carried out by the sister of the department. It is hoped that this state of affairs will soon be remedied.

There has been a large increase in the demand for spectacles amongst the general public since 5th July, and consequently children have had to wait their turn for the dispensing of spectacles after the surgeon has prescribed them. This causes delay, which in many cases is serious, although the delay apparently varies with different firms of opticians.

Previous to 5th July spectacles were obtained for the Education Committee by a contracting firm of opticians, and were delivered to the surgeon who checked them before giving them to the patient, with the necessary instructions. Glasses can now be obtained through any firm on the ophthalmic list. This makes the ‘ following up ’ of patients more difficult, and is accentuated by the delay in delivery.

No doubt these difficulties will be smoothed out when the Regional Hospital Board takes over the ophthalmic service.

It used to be the policy to include, amongst blind school children, those who were extremely short-sighted. Most of these children can be educated by sighted methods. It is now the policy to send such pupils to other special schools, as far as possible. In the education of the partially sighted emphasis is now laid upon teaching the children to make intelligent use of what sight they have, rather than forbidding them to do any form of close work. Although in the very short-sighted children excessive close

work and strenuous exercise are forbidden, those children write in exercise books and not on the blackboard. Various magnifying devices have been tried out, and proved most useful, to those who have the desire to use them.

Sister D. M. Sempers, who has so competently managed the eye clinic since the first world war has retired. We wish her every happiness in her well earned rest."

EAR, NOSE AND THROAT DEFECTS

The percentage of children referred for treatment of unhealthy tonsils and adenoids, at the routine examinations was 2·6 (in 1947 this figure was 2·9). The selection continues to be made, therefore, in accordance with the modern conservative outlook.

The Committee do not make any direct provision for the operative treatment of these conditions, but the specialists operate on a number of those examined by them at the Ear, Nose and Throat Clinic at the hospital.

The number of operations for the year for tonsils and adenoids is 393 compared with 427 in 1947.

EAR, NOSE AND THROAT CLINIC

Mr. Cobb and Mr. Gray hold weekly sessions for the examination of ear, nose and throat defects. The total number of patients seen during the year was 662 (366) and of these 591 (278) were new cases. The children made 733 (445) attendances at this clinic.

The numbers in the brackets refer to the numbers attending in 1947 when only one session was held per week by Mr. Cobb.

The following table gives an analysis of the reasons for attendance :—

Deafness	64
Discharging ears	44
Otitis media	22
Tonsils and adenoids	426
Tonsils	24
Adenoids	13
Rhinitis	6
Deflected septum	8
Cleft palate	7
Other conditions	35
No appreciable defect	13

AUDIOMETRIC TESTING

The systematic testing of hearing was continued during the year.

The number of children tested by the 4-AE gramophone audiometer and the results obtained were as follows :—

Number tested	Deaf—1st test and re-tested	Deaf—2nd test
1,984	123	45

All children tested who are found to have more than nine units loss on the first test are re-tested to eliminate such factors as novelty, lapse of concentration and nervousness.

Of the children tested the following analysis is made :—

Group A	(3—6 decibels)	1,819 Normal
Group B	(9—18 „)	164 Slightly deaf
Group C	(21—30 „)	1 Partially deaf
		1,984

A further analysis is made according to the number of ears tested :—

Group A	(3—6 decibels)	3,279 Normal ears
Group B	(9—18 „)	672 Slightly deaf ears
Group C	(21—30 „)	16 Partially deaf ears
		3,967 (1 Malformed)

Of the children with defective hearing in both ears, the following analysis is made :—

Group B	..	..	..	..	..	..	..	12
Group C	..	..	..	..	..	..	..	1

Special letters were sent to 33 parents, indicating that the test showed the child to have defective hearing. In addition, one child was already attending hospital for treatment, two children were under the care of the aural surgeon and one child was attending the Inspection Clinic. The parents are advised to consult either their own doctor without delay or the medical officers at the branch clinics. In one case the parents proved un-co-operative and of the remainder 12 attended their own practitioners whilst 20 attended the Inspection Clinics.

In addition eight were referred for an individual test by means of the pure-tone audiometer.

The conditions found in those examined were :—

Eustachian deafness	..	..	..	..	..	..	4
Otorrhœa	..	..	..	..	..	..	2
Cerumen	..	..	..	..	..	..	8
Otitis media	..	..	..	..	..	..	1
Catarrh	..	..	..	..	..	..	1
Enlarged tonsils and adenoids	..	..	..	..	..	..	2
Perforated tympanum	..	..	..	..	..	..	1
Further investigation	..	..	..	..	..	..	1

The hearing of 73 children was tested individually by means of the pure-tone audiometer.

The children were referred as follows :—

School Medical Officers	56
Aural Surgeon	2
Speech Therapist	5
Child Guidance Clinic	1
After gramophone audiometer test	9

Full information is obtained from these various sources and following the careful hearing test it is possible to decide on the kind of help the child requires.

SPEECH THERAPY

An analysis of the work carried out during the year is shown below :—

A. Number of cases closed during 1948	122
B. Number of " open " cases carried forward into 1949 ..	107
	229
Number on waiting list at end of 1948	32

CLOSED CASES DURING 1948.

STAMMERING.

Regular treatment at the clinic proved definitely beneficial	36
Supervision—improved without regular treatment	3
Regular treatment at the clinic produced little if any change	3
Treatment incomplete—regular appointments kept then attendance lapsed—no response to attempts made by Therapist for resumption of treatment and further " pressure " from Therapist undesirable	8
Left district prior to completion of treatment—very satisfactory progress had been made	2
Some improvement but for various reasons further treatment not thought profitable	2
Transferred to Child Guidance Clinic	1
Parents refused further appointments after initial interviews	2
	— 57

SPEECH DISORDERS OTHER THAN STAMMERING.

Regular treatment at the clinic proved to be definitely beneficial	27
Improved under supervision	1
Upon investigation no abnormality found	2
Treatment incomplete — some appointments kept then attendance lapsed—no response to attempts made by Therapist for treatment to be resumed and further pressure from Therapist undesirable—in some cases considerable improvement had occurred prior to lapse in attendance	16
Left city prior to completion of treatment	1

Regular treatment at clinic produced little if any change ..	2	
Referred for diagnosis and opinion only	2	
Upon investigation other educational training found to be required :—		
(a) Recommended for education in school for the deaf.. .. .	2	
(b) Recommended for possible education in school for educationally sub-normal	3	
	—	5
		56

STAMMERING TOGETHER WITH ARTICULATION DEFECT.

Regular treatment at clinic proved to be definitely beneficial	1	
Treatment incomplete—progress being made—for various reasons attendance lapsed prior to completion of treatment	2	
	—	3

UNDIAGNOSED.

Appointments offered but no appointments kept	6	
	—	122

B. CASES CARRIED FORWARD INTO 1949.

REGULAR TREATMENT CONTINUING.

Stammering	28	
Speech disorders other than stammering	31	
Stammering together with articulation defect	3	
	—	62

SUPERVISION CONTINUING.

Stammering	2	
Speech disorders other than stammering	14	
Stammering together with articulation defect	1	
Undiagnosed	1	
	—	18

INVESTIGATION COMMENCED	20	
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HAD TREATMENT UNTIL JULY 1948 WHEN TWO THERAPISTS LEFT THE CLINIC—for various reasons treatment not yet resumed

7
— 107

INTERVIEWS.

Treatment interviews with children	2,226
Supervision interviews with children	49
Diagnostic interviews with children	135
Interviews with parents	889
Other interviews	234
Recall interviews after discharge	1

VISITS.

Visits to schools	41
Visits to homes	1
Other visits	18

CONSULTATIVE EXAMINATIONS.

With staff of Child Guidance Clinics	33
With Orthodontists	9
With ear, nose, and throat specialist	14
With plastic surgeon	7
With neurologist	1
With school medical officers	32
Pure-tone audiometer tests	3

Miss Pollitt, the Senior Speech Therapist, reports as follows :—

“ In July, 1948, Miss Collier and Miss Worrall, Assistant Speech Therapists, left the clinic in order to take up ‘ single-handed ’ appointments. Miss Gostelow and Mrs. Pepperell were later appointed to take over their work. These new appointments did not come into effect until the end of November.

The present rate at which cases are being referred to the Clinic is such that a staff of three therapists requires to be maintained consistently if preliminary interviews are to be given to children and their parents immediately after reference ; as soon as there is any decrease in this staffing a waiting list accrues. It will be realised, after reading the first paragraph of this report, that for four of the later months of 1948, the Senior Speech Therapist was working single-handed ; therefore the year has again ended with a waiting list.

Sheffield, however, has been more fortunate than many towns in the country. Many towns have found it impossible to make the Speech Therapy appointments they would wish, owing to lack of suitable applicants. It is highly satisfactory to know that the scope and facilities of the work here have encouraged Therapists to apply for the vacancies which have occurred.

The clinic has continued throughout the year to work under accommodation difficulties. This state of affairs will be remedied as soon as

the extension of the premises into 7, Newbould Lane is complete. Each of the three Therapists will then have a room of her own and there will also be a room available for all the equipment connected with administrative and clerical matters.

One new departure has been instigated during the year. It has been arranged that one of the Assistant Speech Therapists shall spend one morning each week at the Senior Boys' School for the Educationally Sub-normal. This has been arranged in order to see whether or not individual work is beneficial to older children who are educationally sub-normal and whose speech is defective. The Senior Boys' School has been chosen for this experiment as the incidence in speech abnormalities is higher in boys than in girls, and certain older boys in this school were known to be experiencing specific difficulties. The mental age of these adolescents is such that they are more likely to benefit from such re-education than would boys in the Junior School; it has been proved that speech abnormalities in many educationally sub-normal children are related to maturation; the gross articulation defect in a young child who is educationally sub-normal frequently improves of its own accord as the child gets older and to attempt speech re-education with the young child could be demanding something of him which he might well be not ready to give. However, in the case of these older children, who have not outgrown their speech abnormality, it is felt that individual help may be beneficial. As the Therapist only commenced visiting the school regularly in December, 1948, it is as yet too soon to decide whether this procedure, which takes a Therapist away from other clinic work, is sufficiently productive to be worth while. The statistics above refer specifically to cases seen in the clinic—they do not refer to this work which is now being undertaken with the educationally sub-normal.

During the last few years the Speech Therapy Clinic has been establishing itself. It is felt that it is worth while mentioning three factors which have developed and which are particularly helpful in relation to the work of the department. One is the fact that the administration of the clinic enables the Therapist to make personal contact without difficulty with others outside her immediate department: the second is the fact that outside her immediate department, there are all the services which she may need; as the latter include facilities for assessing children's hearing and intelligence, for working with plastic surgeon, ear, nose, and throat specialist, neurologist, and orthodontist, for having personal contact with Child Guidance Clinic staff, School Medical Officers, teachers, and parents: thirdly, in the very near future, the Therapist will be working in a clinic containing rooms which are attractive in themselves and with adequate clerical assistance."

DENTAL TREATMENT

Mr. J. Walter Shaw, the Senior School Dental Surgeon, contributes the following report :—

“ STAFF

The effective strength of the staff of School Dental Surgeons during the year was equivalent to eight full time officers being one less than the previous year.

There was one resignation, Mr. A. G. Oldale, L.D.S., resigning in November to enter private practice.

The unfortunate illness of Mr. T. B. Hosty, L.D.S., has caused him to be absent from duty from January up to date.

At the end of the year there were three vacancies in the present establishment of school dental surgeons. Advertisements inserted in the professional journals during the year, in an attempt at least to bring up the strength of dental surgeons to the present establishment, elicited one request for an application form.

Mr. J. H. Gardiner, B.D.S., was appointed Consultant Orthodontist in April, his appointment increasing the facilities of the School Health Service.

Miss J. Fairburn was appointed as a dental attendant—taking up her duties in January.

INSPECTION

Primary and secondary school children, excluding those in special schools, in the periodic age groups dentally inspected during the year, numbered 19,991.

This figure is less than that for 1947 and fewer sessions were devoted to inspection. The number inspected per session is apparently lower than of recent years but this is due to the parents of new entrants being invited to be present at their first inspection in accordance with the regulations made under the Education Act of 1944.

The time consumed by having the parents present is well worth while providing there is a sufficiency of dental staff to inspect and treat at intervals of not more than a year, all of those children whose parents accept the offer of treatment. It is considered that the present position in regard to staffing precludes the advisability of attracting more parents to accept full treatment for their children owing to it being physically impossible to inspect and treat the children of those parents who accept treatment without being enlightened by an interview as to the value of regular dental care.

As mentioned in the report for the previous year, ‘ in view of the varying numbers of children per clinic it was decided not to discriminate at the school inspections but to let the parents themselves indicate whether or not they wished to accept the offer of treatment required ’ in order that some idea of the establishment of dental surgeons required to carry out an efficient dental scheme may be estimated.

It is felt that a review of the establishment will be necessary in the near future and that in the meantime an adjustment of policy will be required to enable those children of the most appreciative parents to receive the treatment they require at regular intervals nearer the optimum than is at present possible.

TREATMENT OF ROUTINE CASES

For convenient reference applicable figures for the previous year are bracketted where they are considered comparable. The facts that the whole of the school population is not inspected and treated annually due to shortage of staff; there are variations in the number of available dental surgeons; more older children in secondary schools requiring more conservative (filling) treatment per individual are inspected one year compared with another, preclude a true comparison being made in some cases.

13,686 of the 19,991 children inspected were found to require treatment being 68·4 per cent. (61) of the total.

The usual letters sent to the parents of those requiring treatment were returned; 8,763 accepting treatment and 3,078 refusing the offer. 1,825 failed to return the letter and were considered as refusals.

The percentage accepting treatment was 64 (62·8), and 70 per cent. (60) of those requiring treatment were treated.

The attendances made for treatment numbered 30,243 (31,158). The number of fillings compares very favourably with that for last year when the effective strength of the staff is considered, being 11,932 (12,182). The previous year's figure was an appreciable increase upon former years due mostly to the improvement in equipment.

Why so many fillings were inserted in the teeth of fewer pupils is partially explained by the schools inspected this year including secondary schools which were not inspected during the previous year and the increased amount of treatment required by the 14–15 year group in all schools.

A greater number of temporary teeth were filled, 127 (46) at the parents expressed desire for such treatment in cases where the child would benefit. This figure is negligible compared with the amount of conservative treatment which is required in the temporary dentition of the nursery school children, but it is considered inexpedient to devote time to the preservation of these teeth as a routine measure under present conditions.

Fillings per 100 children treated as routine cases (not including special schools and casuals) was 153·3 (98).

The ratio of permanent teeth saved by filling to permanent teeth extracted as unsaveable in the routine cases was 5·3 : 1. Including the teeth removed for regulation purposes i.e. orthodontic treatment by judicious extraction the ratio was 4·2 : 1 compared with last year's figure of 3·7 : 1 and infers an improvement but does not allow for complacency.

SUMMARY OF SESSIONS - FILLINGS - EXTRACTIONS

	SESSIONS					FILLINGS					EXTRACTIONS		
	Inspection	Filling	Extractions including casuals	Anæsthetic	Other work	Synthetic Porcelain	Silver Amalgam	Lined Silver Amalgam	Cement	Copper Amalgam	Temps.	Permanent	
												Unsaveable	Regulation
Routine	} 253	2,299	449	449	*286	785	1,971	6,763	2,283	3	12,532	1,848	499
Special													
Casuals	—	—	—	—	—	—	—	—	—	—	7,933	1,455	—
Total	253	2,299	449	449	286	791	1,994	6,902	2,298	3	20,592	3,336	505

* 286—includes time spent on orthodontic treatment, administration, etc.

The following is a summary of 'other treatment' provided during the year :—

Scalings	1,725
Dressings (temporary fillings)	2,374
Silver nitrate treatment	100
Impressions for space retainers, orthodontic models, etc.	248
Orthodontic adjustments	414
Fitting of orthodontic appliances, part dentures, etc. ..	177
Root treatment	129
Hæmorrhage arrested, sockets syringed, etc.	26
Surgical removal of supernumerary teeth, impacted teeth, pulpotomy, apicectomy, etc.	13
Gum treatments	167
Miscellaneous	127
TOTAL	5,500

X-RAYS

The Dental Department of the Royal Hospital once again undertook the radiography of those children referred for x -ray examination. During the year, 214 (76) children benefited by the early diagnosis or confirmation of suspected abnormal conditions by this means. This form of treatment is becoming more appreciated as its importance becomes known, very few patients failing to keep appointments made for x -ray work.

ORTHODONTICS

Mr. J. H. Gardiner, B.D.S., was appointed Consultant Orthodontist to the School Health Service in April, attending the Central School Dental Clinic one session per month. His services have been very valuable in aiding the diagnosis of, and prescribing the treatment for cases of gross malocclusion or irregularity of the teeth.

Mr. Gardiner's association with the Dental Department of the Royal Hospital has allowed for closer liaison between the School Health Service and that department which has provided treatment for some orthodontic cases during the year. The continued help and co-operation of the Hospital Staff is acknowledged with gratitude.

The School Dental Surgeons have continued to treat selected orthodontic cases in the clinics. The patients chosen are those who will benefit in a short time from this form of treatment thus allowing for a few from most schools to be seen. Longer term cases are referred to the waiting list because they would be too time absorbing for the amount of time which may be devoted, at present, to this work compared with the conservation or filling treatment required by so many.

Below is a table of appliances, etc., fitted during the year.

Various orthodontic appliances.	Acrylic post crowns and tips.	Acrylic jacket crowns and inlays.	One or two tooth dentures as space retainers.	Acrylic splints for fractured incisors.
83	8	9	62	17

SATURDAY MORNING CONSULTATIONS

2,062 patients availed themselves of the opportunity of attending the clinics on Saturday morning for advice in regard to treatment. These sessions are occupied by treating the orthodontic cases and others requiring special appointments in addition to the unknown number of persons likely to attend for consultation.

CLINICS

It is gratifying to record that the alterations to the Central Dental Clinic previously considered favourably and agreed to in principle by the Committee, were commenced in the closing days of the year.

EQUIPMENT

Continuing the policy of replacing obsolete equipment with up-to-date efficient equipment—difficult in these days of shortages and slowness in delivery—it is recorded with pleasure that all dental clinics have now an efficient modern nitrous oxide gas and oxygen machine. This enables patients to be treated with greater safety and much less discomfort than when the old type of apparatus was used.

In many cases the number of times a patient requires to be anæsthetised is reduced as 'a longer safe anæsthetic period is possible allowing for more treatment per anæsthetic.'

Whether more treatment is given at one visit or not depends upon what is best for the child, each being considered as an individual.

As mentioned in the 'Health of the School Child' and quoted in last year's report and because it is felt it cannot be stressed too often, the points which are borne in mind in regard to equipment are 'the safety of the child or patient must be given first consideration—comfort and everything possible consistent with a high standard of technique must be done to eliminate pain and discomfort.'

CHILD WELFARE CASES

The number of pre-school children referred by the Maternity and Child Welfare Clinics and treated in the school clinics was 175 (97).

JUNIOR OCCUPATION CENTRE

One pupil was treated dentally during the year for relief of toothache, by extraction.

MENTAL WELFARE

One uneducable boy was given dental treatment by extraction under nitrous oxide and oxygen after premedication, for relief of toothache and oral sepsis.

CO-OPERATION

Some few children who still persisted in mouth breathing with its ill consequences were referred by the Ear, Nose and Throat Specialist for treatment

dentally. These patients were successfully trained in nasal breathing by the fitting of orthodontic oral screens which are worn during sleep and so do not cause any embarrassment to the child at school or play.

Similarly, two patients from the Speech Therapy Clinic were treated to improve their breathing. One other was fitted with a denture to overcome self consciousness regarding appearance and enable him to respond to his speech training.

CARIES INVESTIGATION

Advantage was taken of the time absorbed by interviewing the parents of the new entrants at the initial dental inspection of these five year olds to chart completely their oral condition.

This enabled the dental surgeons to obtain the figures requested by the Ministry of Education in the 'Health of the School Child' issued in 1947. The results are as shown in the appended table, D.M.F. standing for Decayed, Missing and Filled Teeth.

The twelve year group table for permanent teeth is included.

One school produced figures so unrelated to the others that it has not been included but is shown separately. No reason is offered at present for the difference in results which were such that a repeat of the inspection of these twelve year olds was carried out for confirmation.

Age Group	Number inspected	Total No. of Teeth DMF.		Total children with Nil DMF	Av. No. DMF. teeth per Child		Percentage of children with Nil DMF
		Deciduous.	Permanent		Decid.	Permt.	
5 years ..	1,038	5,047	—	126	4·86	—	12·1
12 years ..	408	—	2,366	30	—	5·8	6·4
One school not included in other 12 year group	109	—	122	50	—	1·1	45·9

The dental defects of those from the secondary schools attending the clinics for treatment were charted. A record was kept of the amount of treatment required with a view to ascertaining the number of dental surgeons considered necessary to treat fully at least annually, all those who would accept the offer of treatment.

The results obtained so far infer the following average numbers of carious teeth per patient requiring conservation.

Age Group	12 yrs.	13 yrs.	14 yrs.	15 yrs.	16 yrs.	17 yrs.	18 yrs
No. of carious teeth per pupil ..	4	5	5	5	6	7	8

CASUALS

Again with a view to formulating for consideration a policy to employ the services of the present inadequate number of dental surgeons for the true benefit of the greatest number of patients at least annually, the 'Casuals' or 'Specials' presenting 'toothache' cards were classified into three groups.

1. Those who had not had an inspection at school and who therefore had no opportunity of accepting or refusing treatment.
2. Those who had been inspected and accepted treatment but who had developed toothache due to the interval between inspections being too great.
3. Those who had refused treatment or, who had accepted when offered treatment but had failed to attend the clinics when invited to do so or, who had stated they were to be treated privately and finally those who had failed to return the letter inviting them to accept treatment.

The 'Casual sessions' are not full sessions but are the later parts of sessions devoted to the extraction of teeth by appointment for those who have accepted routine treatment.

The numbers attending as 'Casuals' have increased during the year particularly since July and the increase in the main is in the group of those who refused the offer of treatment, their total number being almost as great as the other two groups together.

So great has been the increase in this number that the number of appointments made for routine cases has, in some areas, had to be reduced to allow time to alleviate the toothache of these 'Casuals'. This tends towards a vicious circle as it increases the time those accepting treatment must wait for an appointment thus increasing the 'Casuals' in that group.

SPACE RETAINERS AND FRACTURED INCISORS

As shown in one of the tables the number of dentures inserted as space retainers where front teeth have been lost is high compared with the other forms of treatment to maintain the natural tooth as its own 'space retainer.'

This is due to the lamentable lack of knowledge of the general public as to the need for the earliest treatment of these front teeth damaged by accidental blows or falls.

Many times the child is not brought to the clinics until the fractured or damaged tooth is floating in pus, beyond conservation treatment. In consequence, the unfortunate child is condemned to the risk of the space caused by the loss of the tooth, closing with a very poor æsthetic result or to wearing a partial denture in a developing mouth to maintain the space until such time as a 'bridge' or permanent denture may be fitted.

With early treatment most of these teeth may be preserved, very many with a live pulp so essential in those young people, the roots of whose front teeth are not completely formed at the time of fracture."

ORTHOPAEDIC AND POSTURAL DEFECTS

The orthopædic clinics have been held regularly throughout the year. A summary and analysis of the cases seen by the Orthopædic Surgeons is given below :—

Conditions	Seen at the Clinic	At Special Schools		Total
		Arbourthorne North	Nether Green	
Spastic paralysis	17	5	7	29
Infantile paralysis	6	2	2	10
Congenital deformities :—				
(a) Talipes	9	1	—	10
(b) Dislocation of hip ..	7	—	4	11
Scoliosis	15	—	—	15
Kyphosis	16	—	—	16
Flat foot	259	—	—	259
Genu valgum	55	—	—	55
Hydrocephalus	—	—	1	1
Perthé's disease	3	2	3	8
Congenital claw toe	1	—	—	1
Torticollis	12	—	—	12
Pes cavus	14	—	—	14
Congenital short leg	2	1	—	3
Congenital high scapula ..	2	—	—	2
Hallux rigidus	12	—	—	12
Claw foot	10	—	—	10
Osteomyelitis	2	—	—	2
Hammer toe	9	—	—	9
Hallux valgus	23	—	—	23
Genu varum	4	—	—	4
Overlapping toes	7	—	—	7
Schlatter's disease	8	—	—	8
Deformed toes	19	—	—	19
Footstrain	2	—	—	2
Congenital amputation forearm	2	—	—	2
Astragalectomy	1	—	—	1
Hallux flexus	1	—	—	1
Paralytic talipes	1	—	—	1
Congenital short neck	1	—	—	1
Old compound fracture left femur	1	—	—	1
Congenital deformity hand ..	4	—	—	4
Dorsal kypho-scoliosis	1	—	—	1
Displaced coccy	1	—	—	1
Coxa valga	1	—	—	1
Old fracture left femur	1	—	—	1
Ankylosis	1	—	1	2
Ununited fracture	1	—	1	2
Septic arthritis	2	—	—	2
Enlarged metatarsal bone ..	1	—	—	1
Synovitis knee	8	—	—	8
Epiphysitis os calcis	5	—	—	5
Exostosis dorsum foot	2	—	—	2
Exostosis os calcis	2	—	—	2
Exostosis vertebral border scapula	1	—	—	1
Mallet finger	1	—	—	1
Deformed fingers	2	—	—	2
Apophysitis os calcis	2	—	—	2
Congenital short metatarsal ..	1	—	—	1
Contusion chest	1	—	—	1
Plantar wart	2	—	—	2
Congenital discoid ext. semi lunar cartilage	1	—	—	1
Webbed fingers	1	—	—	1
Bilateral achilles bursitis ..	2	—	—	2

Conditions	Seen at the Clinic	At Special Schools		Total
		Arbourthorne North	Nether Green	
Poor posture	2	—	—	2
Metatarsalgia	4	—	—	4
Rickets	—	—	1	1
Muscular dystrophy	—	1	—	1
Amputation leg	—	1	—	1
Others	33	—	—	33
N.A.D.	36	—	—	36
CASES	640	13	20	673
ATTENDANCES	1,010	14	22	1,046
Number of new cases				347
Number of old cases				326
Number of cases discharged				120
Number of cases transferred to hospital				11
Number of operations advised				14
Number of operations performed				6
Number of new appliances ordered				211

NON-TUBERCULOSIS CASES SEEN BY MR. LEE PATTISON

Number of Sheffield school children treated at King Edward VII Hospital during 1948	7
Number of Sheffield school children seen at the Orthopædic clinics of the Child Welfare Centre during 1948	108

REMEDIAL EXERCISES AND PHYSIO-THERAPY

Treatment is given at the Edgar Allen Physical Treatment Centre and 43 children were referred to the Centre through various agencies. Dr. Abercrombie, the Medical Director, has kindly provided the following complete report :—

Condition	Number treated	Result of Treatment		
		Free from Symptom	Improved	Not Improved
Anaemia	1	—	1	—
Bronchiectasis	2	—	2	—
Bronchitis	3	—	3	—
Cerebral athetosis	1	—	—	1
Cervical adenitis	2	—	1	1
Congenital defect	1	—	1	—
Debility	8	—	8	—
Facial paralysis	1	1	—	—
Fibrositis	3	2	1	—
Fracture ankle	1	1	—	—
Hemiplegia	1	—	—	1
Injury hand	2	2	—	—
Kyphosis	4	2	2	—
Paresis	1	—	—	1
Pes cavus	2	—	2	—
Pes planus	3	2	1	—
Rheumatism (sub acute)	1	1	—	—
Scoliosis	3	2	1	—
Sprained ankle	1	1	—	—
Sprained knee	2	2	—	—
TOTAL	43	16	23	4

TUBERCULOSIS OF BONES AND JOINTS

Number of Sheffield school children treated at King Edward VII
Hospital during 1948 44

Number of Sheffield school children seen at the Tuberculosis
Dispensary (Surgical Department) during 1948 415

CHIROPODY CLINIC

Mr. Aldam, the Chiropodist reports as follows :—

“ The Chiropody Clinic was opened on 9th January, 1948, and during the year 51 weekly sessions were held. All cases attending were referred to this department by the school medical officers.

During the year a total of 1,075 treatments were given to 463 cases. Of these cases 410 have been discharged cured, three were transferred to the Orthopædic Surgeon, 50 cases being either still under observation or told to return via the school medical officer if the necessity arose.

In a children's clinic one expects to find a high incidence of verrucæ pedis (plantar warts) and 378 cases were treated. It was very gratifying to note that all these were discharged cured and the treatments per case was 2·68.

The cases of helloma (corns) were quite small—28 cases—27 helloma durum and one helloma molle, and I think that when the Chiropody Clinic is more widely known by parents there will be a marked increase in this type of case reporting for treatment.

The cases of onychogryphosis were all due to trauma and would be caused very possibly during creeping in babyhood.

Onychocryptosis. All cases were discharged cured—the causes being incorrect cutting usually by the children themselves.

Seven cases of metatarsalgia were all discharged cured.

All cases of bursitis responded well to treatment.

GENERAL OBSERVATIONS

Two cases only of hyperdrosis were seen although these cases were sent for other conditions—both cases were cured.

In general, footwear was good and of correct sizes. A very small percentage were wearing shoes less than half size too small. Two cases were seen wearing 6 who required 6½ on one foot and size 8 on the other. The parents obtained correct sizes in shoes. I put this down to the more frequent use of the measuring and sizing stick in footwear departments.

I deplore the summer habit of not wearing socks or stockings but here children follow the fashion of their elders. The wearing of sandals in summer is in some respects due to the present cost of shoes. A very small number

attended in plimsolls and I attribute this more to the fact that the child wants to run about in plimsolls rather than necessity."

Condition	Number of Cases	Number of Attendances
Verrucæ	378	966
Helloma durum	27	29
Helloma molle	1	1
Bursitas	2	3
Onychogryphosis	9	12
Onychocryptosis	4	7
Flexed toes	2	3
Metatarsalgia	8	13
Pronation	10	16
Bursa	2	2
Callosity	5	5
Flat feet	5	8
Weak foot	4	4
Hallux valgus	4	4
Painful 5th metatarsal tuberosity	1	1
Fibroma	1	1
TOTAL	463	1,075

HEART DISEASES AND RHEUMATISM

The investigation of acute rheumatism in persons under 16 years of age has been continued through the year. The scheme sponsored by the Rheumatic Fever Committee of the Royal College of Physicians was described in last year's report. The School Health Service is taking an active part in the survey.

A full description of the nature of the work undertaken by the Physician at the Rheumatism and Heart Clinic has been given previously. The medical officers continue to welcome the opportunity afforded by this specialist service.

At this clinic also, suitable children are nominated for Ash House School and here all the children are effectively "followed-up" on discharge from the school.

A summary and analysis of the cases seen by the specialist follows :—

Condition	School children		
	New Cases	Old Cases	Attendances
1. Rheumatic Pains or Arthritis—			
(a) With heart affection	8	43	52
(b) Without heart affection	5	23	30
2. Rheumatic Chorea—			
(a) With heart affection	4	9	15
(b) Without heart affection	6	7	18
3. Rheumatic Carditis without [*]			
(1) or (2) above	32	110	158
4. Congenital Heart Disease	25	36	61
5. Functional Heart Disorder	25	5	34
6. No Rheumatism or Heart Disease or Disorder	46	28	78
7. Recent Rheumatism. No longer active. No carditis	21	42	71
TOTALS	172	303	517

TUBERCULOSIS

Co-ordination between the School Health Service and the Clinical Tuberculosis Officer, Dr. Midgley Turner, continues smoothly and efficiently. Dr. Midgley Turner's report on the work of the Dispensary in relation to school children follows :—

“ The work of the Tuberculosis Dispensary amongst tuberculous school children and suspects continues to be carried on in close co-operation with the School Health Service. The sessions on Wednesday mornings and afternoons and Saturday mornings are mainly devoted to the examination of school children at the Tuberculosis Dispensary.

The names of all children who are known to have been in contact with infectious cases of tuberculosis in their homes, are supplied to the School Medical Officer. By this means the School Medical Officer is able to keep these children under specially close supervision. In all, 157 of these Contacts were reported to the School Medical Officer during 1948.

The examination of 'Contacts' has been continued and the regular treatment and supervision of tuberculous children has been carried out. Of the 245 'Contacts' of school age examined, 56 were retained on treatment and supervision at the Tuberculosis Dispensary.

During the year 1948, 2,716 attendances (exclusive of new cases) were made by school children, 1,370 notified cases and 1,346 observation cases.

NEW CASES. 14 notified cases of tuberculosis of the lung were examined, 245 'Contacts' and 508 suspicious cases. (Of the latter, 152 were sent up by the School Medical Officer).

In connection with the examination of school children, 1,217 *x*-ray films were taken.

During the year 61 notified and 109 suspicious cases were admitted into Sanatorium for observation and treatment. A Mantoux test is carried out on all children admitted to Sanatorium for either observation or treatment. In addition 431 Mantoux tests were carried out at the Dispensary.

The number of Notifications of Tuberculosis in school children received was :—

PULMONARY.	Males	41	NON-PULMONARY	Males	19
	Females	39		Females	23

Tubercle bacilli were found in the sputum and pleural fluid of seven children.

Forty-six places at the Whiteley Wood Special School were reserved for children selected by the Tuberculosis Medical Officer. Should he not require the whole of the 46 places, there is an arrangement whereby the vacant places are filled by the School Medical Officer. The children selected had signs of infection of the chest glands without marked invasion of the lung tissue, and were, therefore in a non-infectious condition.

In addition, 26 places were reserved at the Springvale House Special School for children selected by the Tuberculosis Medical Officer."

MASS RADIOGRAPHY SURVEY

The proposal that all the pupils attending the Authority's schools who were aged 14 and over should have an *x*-ray examination of the chest was readily accepted by the Committee.

Accordingly during the first quarter of the year 2,870 girls and 3,139 boys were *x*-rayed at the Mass Radiography Centre and miniature films were taken for this first examination.

There were 191 recalls (109 boys and 82 girls) for re-*x*-ray and large films were taken. Seventy-eight of these (42 boys and 36 girls) were further recalled for clinical interviews. As a result 11 boys and 8 girls were referred to their own doctor for various conditions of the chest and 13 boys and 6 girls were referred to the surgical chest specialist at the City General Hospital.

Six boys and five girls were referred to the Tuberculosis Dispensary. Of these one boy and four girls were diagnosed as suffering from active primary tuberculous lesions and one boy from inactive post primary tuberculous lesion. These children were of course admitted for sanatorium treatment.

In addition five boys and eight girls were re-*x*-rayed at various intervals. Of this number one boy and four girls have been discharged and the remainder are to be further examined in January, 1949.

This extra examination of the pupils in the final year at school is welcomed and it conforms with the ideal underlying the Service—namely the early detection of variations from the normal.

PHLYCTENULAR CONJUNCTIVITIS

There is evidence to show that tuberculosis plays a part in the ætiology of most of the cases of phlyctenular conjunctivitis. This connection is so marked that the British Pædiatric Association recommend that all children with this condition should be referred to the Tuberculosis Dispensary. This has been the practice of the School Health Service for some years and the results of the investigation for the past year are shown below.

Boy aged 6	..	x ray "Enlarged roots"—sanatorium treatment offered.
Girl aged 10	..	Some calcified nodules both roots. No appearance of tuberculosis. Erythema nodosum present—under observation.
Girl aged 6	..	Admitted to Winter Street Hospital April, 1948, and discharged July, 1948. Positive Mantoux.
Girl aged 8	..	Mother stated x ray negative but under observation at the Tuberculosis Dispensary. Positive Mantoux.
Girl aged 7	..	No evidence of tuberculosis.
Boy aged 10	..	Under observation at Tuberculosis Dispensary. Positive Mantoux.
Boy aged 8	..	Both roots enlarged, some calcification. Sanatorium treatment offered. Negative Mantoux.
Boy aged 6	..	Chest x ray negative—referred back to branch clinic.
Boy aged 11	..	Chest clear.
Boy aged 6	..	Probable recent primary infection. Negative Mantoux.
Boy aged 10	..	Non-tuberculous.
Girl aged 12	..	Chest clear—referred back to School Health Service.
Boy aged 13	..	Chest clear, roots dense and nodular, bronch, gland infection. Mantoux negative—referred back to School Health Service.
Boy aged 12	..	Bronchial gland infection, possibly fairly recent. Under observation.
Boy aged 15	..	Lung fields clear. Under observation Ophthalmic Surgeon. Now left school.
Girl aged 6	..	No signs of active disease—referred back to School Health Service.
Boy aged 6	..	Sanatorium treatment offered and accepted. Now discharged. Positive Mantoux.
Girl aged 7	..	Both roots large, evidence of calcification—for Mantoux—under observation.
Girl aged 11	..	Scoliosis and gross deformity of thoracic cage. Lung fields clear.
Boy aged 5	..	Bronchial gland infection—Mantoux test positive. Notified tuberculosis. Admitted Winter Street Hospital and discharged after 73 days. Positive Mantoux.
Boy aged 8	..	Lung fields clear—Negative Mantoux.
Boy aged 8	..	Parents refused to take child to Tuberculosis Dispensary.
Boy aged 11	..	No evidence of tuberculosis, enlarged tonsillar glands, for observation in sanatorium.
Girl aged 11	..	Notified as tuberculosis. In Winter Street Hospital. Positive Mantoux.
Girl aged 11	..	x ray—enlarged left root—to be kept under observation.

ASTHMA

The special physical and breathing exercises recommended by the Asthma Research Council have been carried out in a group of 18 children at one of the open-air schools. Here also the child's general health and any associated condition receive attention.

All these children show steady improvement and this is more marked in the group of older children.

CHILD GUIDANCE CENTRE

Reference to the appended figures shows that of the 279 children sent to this clinic during the year, 88 were girls and 191 were boys. This is a slightly higher proportion of boys than usual, though the average of former years shows almost twice as many boys than girls referred. The excess arises almost entirely in the "behaviour disorder" and "intellectual difficulty" categories.

Against the 279 cases opened only 243 were closed during the year. This lag between cases closed and cases opened has been an almost constant feature of annual reports since the clinic opened in 1937, and is accounted for partly by expansion of the work and partly by shortage of staff. The clinic has now been without either of its two psychiatric social workers since July, 1946, though the appointment of Miss B. Bernthal as an additional psychologist in September, 1948, has now gone some way to redressing this deficiency. It has been possible, during the latter part of the year, to reduce the initial waiting list to negligible proportions and cases have been seen almost as soon as referred. Since the major part of the cases are dealt with by consultation, this means that a large proportion have been given help within a month or so of the problem coming to light. The remainder have needed more intensive help and have needed either "supervision" or "treatment." "Supervision" involves following a case up over a period, either by visits of the staff to the schools or visits of the child and parents to the clinic, at infrequent intervals. "Treatment" involves regular visits (usually weekly) to the clinic. The clinic has never been able to keep up to date with the treatment cases and the waiting list for treatment continues to increase. The raising of the school leaving age has added considerably to the clinic's burden in this respect, for not only are more older children being referred, but more of these children are being treated. It was usually impossible to offer any prolonged treatment to children aged 13 and over when referred because of the school leaving situation, but these children can now have such treatment where necessary, and are in fact usually given priority.

As regards intelligence, the slight upward tendency commented on in the last annual report has continued, and whilst 40 per cent. of the closed cases have been those of "dull and backward" children, more children of superior intelligence have been dealt with.

Among "Reasons for Reference" the proportion of children referred for behaviour disorders has been higher during the year under review, but it is impossible to say whether this is a significant tendency or merely a chance variation which all figures of this type show from time to time.

Social agencies have been most co-operative and helpful during the year as have teachers and the various departments of the Education service. Educational and propaganda work through talks to parents, teachers, students and various social groups has been carried out throughout the year. These talks have seemed much appreciated and have provided many opportunities for informal instruction, not only about the work of the clinic but also about numerous problems of mental hygiene.

	Sheffield	West Riding	Doncaster	Total
NUMBER OF CASES REGISTERED DURING 1948.				
Girls	87	1	—	88
Boys	182	9	—	191
Total	269	10	—	279
ANALYSIS OF REGISTERED CASES .				
Cases closed during 1948	233	8	2	243
Cases open 31st December, 1948	284	5	—	289
Cases on waiting list 31st December, 1948	13	—	—	13
Total	530	13	2	545
REASONS FOR CLOSING CASES DURING 1948.				
Did not attend at all	9	—	—	9
Patient unco-operative	2	1	—	3
Parent unco-operative	11	—	—	11
Further attendance impossible	8	1	—	9
Transferred to other treatment	3	—	1	4
Consultation only	157	4	—	161
Treatment completed	26	2	1	29
After supervision	17	—	—	17
Total	233	8	2	243
ANALYSIS OF CASES OPEN 31ST DECEMBER, 1948.				
Under treatment	73	1	—	74
„ supervision	61	1	—	62
„ investigation	24	1	—	25
Awaiting treatment (investigation complete)	126	2	—	128
Total	284	5	—	289

REASONS FOR REFERENCE OF ALL CASES.

	Nervous disorders	Habit disorders	Behaviour disorders	Intellectual difficulties	Other disorders	Total
Sheffield	34	20	97	117	1	269
West Riding	2	—	5	3	—	10
Total	36	20	102	120	1	279

SOURCE OF REFERENCE.

	Head Teacher	Parent	School Medical Officer	Speech Thera- pist	Juvenile Court	Private Doctor	Hospital	Others	Total
Sheffield	108	38	47	35	18	2	16	5	269
West Riding	—	2	4	—	2	—	1	1	10
Total	108	40	51	35	20	2	17	6	279

AGE RANGE ON REFERENCE.

Age	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	16+	Total
Sheffield	—	—	6	5	17	23	28	34	22	33	25	23	19	25	6	3	—	269
West Riding	—	—	—	—	—	—	2	—	—	—	4	—	3	—	1	—	—	10
Total	—	—	6	5	17	23	30	34	22	33	29	23	22	25	7	3	—	279

INTELLIGENCE QUOTIENT RANGE OF CASES CLOSED DURING THE YEAR.

	70 and below	71 to 80	81 to 90	91 to 100	101 to 110	111 to 120	121 to 130	Over 130	Not tested	Total
Sheffield	35	42	41	41	28	18	10	8	11	234
West Riding	—	1	—	—	1	1	1	1	2	7
Doncaster	—	—	1	—	—	—	—	1	—	2
Total	35	43	42	41	29	19	11	10	13	243

RETURN OF INTERVIEWS AT THE CLINIC.

	Psychiatrist's Department	Psychologists' Department	Social Workers' Department	Total
Sheffield	730	2,574	—	3,304
West Riding	31	85	—	116
Doncaster	—	2	—	2
Total	761	2,661	—	3,422

WORK OF SCHOOL NURSING STAFF.

The work of the School Nursing Sisters and Nursing Assistants has been fully described in previous reports.

SUMMARY OF WORK OF THE SCHOOL NURSING SISTERS AND NURSING ASSISTANTS IN 1948.

IN THE SCHOOLS—

Attendance daily with the Medical Officers at Routine Inspection.

Examination of children under cleanliness scheme—Boys	67,800		
		Girls	79,908
			147,708

„	„	for “ following up ”	.. .. .	1,356
„	„	for investigation of outbreak of		
		Infectious Diseases	.. .. .	23,460
„	„	for other purposes	.. .. .	20,989
Weighing and measuring	.. .. .			65,983
Number of visions tested	.. .. .			12,643
Number referred to clinics	.. .. .			3,071
Number of visits to schools	.. .. .			13,085

IN THE CLINICS—

INSPECTION CLINIC—Attendance with the Medical Officers.

TREATMENT CLINIC—

	EYE TREATMENT		EAR TREATMENT		DRESSINGS	
	Cases	Attend- ances	Cases	Attend- ances	Cases	Attend- ances
Attercliffe	206	761	231	2,001	2,122	8,392
Pitsmoor	215	996	320	1,942	816	6,395
Hillsboro'	185	485	210	1,003	2,620	6,250
Heeley	215	1,079	260	2,610	1,098	5,743
Central	208	882	263	1,962	1,429	6,439
Handsworth	45	190	61	243	294	1,221
Woodhouse	47	131	53	287	572	2,374
Shiregreen	202	622	324	1,905	1,357	6,869
Manor	290	1,402	212	1,210	2,130	9,095
Wisewood	158	661	108	580	785	3,853
Wybourn	65	496	62	889	1,056	6,340
Southey Green ..	119	253	115	835	1,555	4,591
Special Schools ..	183	2,803	164	5,054	2,261	35,889
	2,138	10,761	2,383	20,521	18,095	103,451

IN THE HOMES—

Visits for “ following up ”	.. .. .		900
„ neglect, uncleanliness, etc.	.. .. .		246
„ various purposes	.. .. .		1,443

CLEANLINESS SURVEY—

Total examinations—Boys	..	67,800
Girls	..	79,908

147,708

Nits found	Boys ..	5,759	(8·49%)	27,675	(18·73%)
	Girls ..	21,916	(27·42%)		
Verminous	Boys ..	803	(1·18%)	2,581	(1·74%)
	Girls ..	1,778	(2·22%)		
Dirty	Boys ..	726	(1·07%)	1,008	(0·68%)
	Girls ..	282	(0·35%)		
Verminous clothing found ..		—		55	
Number of individual children found to be not clean during the year				5,664	
Number of heads cleansed at the Clinics (130 boys and 455 girls)				585	
Bad clothing	Boys ..	146	(0·21%)	232	(0·15%)
	Girls ..	86	(0·10%)		
Bad footwear	Boys ..	199	(0·29%)	303	(0·20%)
	Girls ..	104	(0·13%)		

It should be noted that out of the total number of examinations it was found necessary in the worst cases of uncleanness to send a special card of instructions to the parents of 929 boys (1·37%) and 3,696 girls (4·62%) and a second one to a further 62 boys and 204 girls. Of these 585 (130 boys and 455 girls) were cleansed at the clinics.

Furthermore, the apparently large number of children found with nits includes those with a few nits only. They are noted, however, so that they can be kept under observation. The children who had special cards of instruction indicate the measure of infestation, which, whilst an improvement on the previous year, is distressingly large.

The standard of clothing and footgear, however, shows a slight deterioration over last year's findings. In this connection it is interesting to note that amongst the items of clothing provided by the Authority during the year under the Education Act, 1944, were 1,218 pairs of boots for boys together with 1,468 items of clothing, and 883 pairs of shoes for girls, together with 1,227 items of clothing.

In accordance with the local practice 1,644 children who were found to be suffering from various defects during general survey were referred by the school nursing sisters to the clinics and 1,427 children were also referred to the clinics by the nursing assistants during cleansing inspections.

During the year the school nursing sisters also made 374 visits to homes in connection with the Rheumatism Investigation, and 476 visits to homes in connection with the Ministry of Education's enquiry into the causes of absenteeism.

The nursing assistants made 42 visits to the clinics in connection with the Ministry of Education's investigation into the different qualities of insecticide preparations; 174 children in all made 696 visits to the clinics for this purpose.

INFECTIOUS DISEASES AND IMMUNIZATION AGAINST DIPHTHERIA

The School Health Service works in active co-operation with the Public Health Service over the control of infectious diseases in the schools. The general arrangements and methods employed in maintaining close supervision and in investigation have been fully described in previous reports. The incidence of infectious disease during the four quarters of the year as reported through the schools is shown below. These numbers do not give complete cases but are sufficiently indicative of the trend of infection.

	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total	
					1948	1947
Measles	122	290	383	2,386	3,181	2,986
German measles	127	222	94	89	532	546
Whooping cough	812	583	130	100	1,625	805
Chicken, pox . .	1,093	834	379	289	2,595	2,230
Mumps	1,760	1,010	324	111	3,205	1,113
Scarlet fever . .	202	188	214	373	977	394
Diphtheria . .	3	2	8	4	17	19

DIPHTHERIA

The total number of notified cases of diphtheria occurring in the age groups 5–15 was 17, compared with 19 in 1947, 54 in 1946, 119 in 1945, 215 in 1944, 434 in 1943, 708 in 1942 and 853 in 1941.

The total number of fatal cases occurring amongst school children was one, compared with one in 1947, one in 1946, four in 1945, four in 1944, five in 1943, 18 in 1942 and 16 in 1941. These children had not been immunized.

As a local measure the 47 children discharged from hospital, some of whom had been admitted as suspicious cases, were examined, together with 151 contacts.

The school medical officers notified two cases of diphtheria, both of the throat. Swabs were taken as indicated through the year and the following table shows the number and result.

	Positive	Negative	Total
Throat	2	66	68

There were five visits to schools where cases of diphtheria had occurred for the purpose of investigation.

IMMUNIZATION AGAINST DIPHTHERIA.

The details describing the local drive for immunization have been given in previous reports. The problem of dealing with indifferent parents is tackled by follow-up letters and personal appeals by head teachers, the medical officers and the school nursing sisters wherever possible. It is difficult, however, to gain access to many of these parents, and it is regrettable to note that the children may suffer through their indifference.

From available records it is gratifying to note that 80 per cent. of the children in the City age 5-15 had been immunized by December, 1948.

PARTICULARS OF THE WORK DONE IN 1948 BY THE SCHOOL HEALTH SERVICE.

(a) *Primary Immunization.*

Number of children who have attended for treatment	..	1,477
" " received complete treatment—		
Children up to 5 years	.. ..	355
" 5 to 15 years	.. ..	744
Number received part treatment	.. ..	378

(b) *Stimulating or Reinforcing Doses.*

Number of letters forwarded	.. ..	4,824
Number of acceptances	.. ..	3,870
Acceptance rate	.. ..	80 per cent.
Number treated	.. ..	3,841
(99 per cent. of the acceptances).		

(c) *Number of Attendances.*

Primary Immunization	.. ..	2,819
Stimulating or Reinforcing Doses	.. ..	3,841
Total	..	<u>6,660</u>

PARTICULARS OF WORK DONE BY THE SCHOOL HEALTH SERVICE
SINCE THE INCEPTION OF THE SCHEME.(a) *Primary Immunization.*

Number who have received complete treatment during	1941	..	5,091
" " " " " "	1942	..	19,495
" " " " " "	1943	..	15,478
" " " " " "	1944	..	3,357
" " " " " "	1945	..	2,582
" " " " " "	1946	..	2,397
" " " " " "	1947	..	2,102
" " " " " "	1948	..	1,099
			<u>51,601</u>

(b) *Stimulating or Reinforcing Doses.*

Number of stimulating doses given during	1944	.. ..	1,995
" " " " " "	1945	.. ..	2,376
" " " " " "	1946	.. ..	4,925
" " " " " "	1947	.. ..	3,202
" " " " " "	1948	.. ..	3,841
			<u>16,339</u>

(c) *Total number of attendances* 152,588

SCARLET FEVER

The total number of cases of scarlet fever occurring in children between 5–15 years notified to the Medical Officer of Health during 1948 was 977 compared with 394 in 1947. Fortunately the disease was a mild type. The school medical officers notified eight cases and examined 876 cases following discharge from isolation. There were 69 visits paid to the schools for the purpose of investigation.

MEASLES

It is necessary to note that only 75 cases of measles occurred in the last quarter of 1947 to appreciate the biennial periodicity of measles. The school medical officers notified two cases and paid 73 visits to the schools for this condition.

GERMAN MEASLES

The school medical officers paid three visits to the schools for this condition.

WHOOPIING COUGH

The number of cases occurring during the year was larger than in the previous year following its accustomed course in relation to the incidence of measles. The school medical officers notified 15 cases during the year and 19 visits were paid to the schools.

CHICKEN POX

The number of cases occurring during the year remained high and school medical officers paid 16 visits to the schools for this condition.

MUMPS

This condition also showed a marked incidence during the year and 27 visits were paid to the schools.

RHEUMATISM

Under the Notification of Infectious Diseases—Acute Rheumatism Regulations, 1947; the school medical officers notified eight cases.

SCHOOL CLOSURE

No school or department was closed during the year on account of infectious disease.

PHYSICAL EDUCATION

Close co-operation exists between the School Health Service and those engaged in physical education. In particular, individual reports are made on children submitted for an opinion as to their suitability for various types of physical activities. During the general medical examination also, this consideration is always borne in mind and head teachers are informed where restrictions are considered necessary.

The school health staff naturally take much interest in this part of education which plays a marked share in the development of the child.

It is gratifying to report further development on behalf of the handicapped children. During the year a specialist teacher of physical education was appointed to the School for the Blind. This instructor also visits the two schools for physically handicapped children.

A week-end conference was held in Manchester in November to discuss the subject of physical education for handicapped children and was attended by a large number of those concerned with these children in Sheffield.

The report on this year's activities by Mr. Carr, Chief Superintendent of Physical Education, will be found in the Appendix on page 84.

It is a pleasure to acknowledge here the help extended by Mr. Carr on special problems met with in groups and individual children.

SPECIAL ENQUIRY

INVESTIGATION INTO ABSENCE FROM SCHOOL AND THE MORBIDITY OF SCHOOL CHILDREN

The purpose and content of this enquiry were discussed in last year's report. It is a pleasure to report that the investigation was completed satisfactorily during the year and that the Chief Medical Officer to the Ministry of Education has expressed his satisfaction with the local efforts.

The findings have not yet been completely analysed and the conclusions are awaited with lively interest.

Now that the enquiry is completed thanks can be expressed again to the teachers, school nursing sisters and the education welfare officers for their active and unremitting support in collecting the information required for the investigation.

CO-OPERATION OF PARENTS, TEACHERS, EDUCATION WELFARE OFFICERS AND VOLUNTARY BODIES

The value attached to the parents' presence at the routine medical inspection and the importance of consultation between the doctor and the parent whenever possible has been stressed in previous reports.

The following percentage of parents took advantage of attending with the children at the routine examinations :—

Entrants	..	..	..	..	..	..	..	90·81 per cent.
Intermediates	..	..	..	..	..	..	..	69·95 per cent.
Leavers	..	..	..	..	..	..	..	37·07 per cent.

It is pleasing to note the high percentage of parents attending with the intermediate group continues.

Parents also value the consultation offered and accompany the children in increasing numbers at most of the clinics.

To the teachers and the inspectorate a special debt of gratitude is due. They help in very many ways and give active assistance in ensuring the

success of medical, dental and cleanliness inspections, diphtheria immunization treatment, and in the preparation of special reports on individual children.

The education welfare officers give valuable aid in the following-up system and provide the connecting links between the ancillary sections.

Appreciation can be expressed here of the co-operation and help given by general practitioners and medical officers at the various hospitals.

The help which has been given during the year by the National Society for the Prevention of Cruelty to Children, through their energetic and tactful local inspectors has again been much appreciated.

The Cripples' Aid Association, the Voluntary Association for Mental Welfare and the Council of Social Service have again rendered useful service during the year.

Due acknowledgment and thanks are given to the local Press for their continued sympathetic and helpful presentation of school health topics.

It is a pleasure to record that the trips were again arranged last year to take deserving children selected by the Local Education Authority to the seaside for one day through the Sheffield Children's Seaside Holiday Fund. This fund is organised by the *Sheffield Telegraph* and the *Star* and is well supported by the public.

5,680 children from Sheffield and district were taken to Cleethorpes where they were provided with food and entertainment.

School teachers volunteer to travel with the children who are also accompanied by representatives of the fund.

During the year the Sheffield School Children's Holiday Association supported by the Sheffield School Teachers had the full use of their Fairthorn Convalescent Home. In 1948 "Fairthorn" reopened on the 28th February and remained open until the 22nd December.

During the year 112 girls and 90 boys spent four weeks at "Fairthorn" and a further 12 girls and 11 boys had holidays of up to three weeks.

All these children were selected on the recommendation of the school medical officers. In addition 81 children were given a fortnight's holiday during the summer holiday period. These children were selected by the head teachers of schools in the poorer parts of the city as children needing a holiday and coming from homes deprived of one or both parents. Pearsons' Fresh Air Fund contributed towards the maintenance of these children.

All the children were examined by the school medical officers before they entered "Fairthorn."

It is a pleasure to record this valuable help given by the Association towards restoring health to the children which is an important contribution towards the work of the School Health Service.

NURSERY SCHOOLS AND CLASSES

A full account of the medical care and dietary provision for these infants has been given in previous reports.

The concession of giving cod liver oil and orange juice to all these children has been continued. In addition, an iron supplement is given to infants selected by the medical officers, suffering or suspected to be suffering from anæmia, with resulting improvement.

The medical officers paid 223 visits to the schools and classes and examined 2,013 for " routine " and 2,109 as " selected " and quarterly examinations, calling for 31 letters and 29 letters respectively, advising parents of defects found. In the majority of cases the recommendations were carried out without any further ultimatum, but in a few cases " follow-up " was necessary by the school nursing sister.

RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION

Defect or Disease	Routine Inspection Number of Defects		Special Inspection Number of Defects	
	Requiring Treatment	Requiring Observation	Requiring Treatment	Requiring Observation
Minor ailments	8	9	152	—
Visual defects	16	2	6	5
Defects of nose and throat ..	60	75	42	69
Other defects	73	78	31	134

HEIGHTS

NURSERY SCHOOLS AND CLASSES

B O Y S						G I R L S					
Age	1944 Inches	1946 Inches	1947 Inches	1948 Inches	Number examined 1948	Age	1944 Inches	1946 Inches	1947 Inches	1948 Inches	Number examined 1948
2	35·16	35·28	35·07	35·52	21	2	34·66	34·67	35·18	35·07	58
3	37·80	37·80	37·69	38·12	251	3	37·31	37·38	37·43	37·77	476
4	40·08	40·13	40·08	39·84	327	4	39·65	39·72	39·65	39·81	627

WEIGHTS

NURSERY SCHOOLS AND CLASSES

B O Y S						G I R L S					
Age	1944 Pounds	1946 Pounds	1947 Pounds	1948 Pounds	Number examined 1948	Age	1944 Pounds	1946 Pounds	1947 Pounds	1948 Pounds	Number examined 1948
2	29.61	29.96	28.66	30.68	21	2	28.02	28.41	27.84	29.78	58
3	33.35	33.39	33.01	34.83	251	3	31.91	32.27	31.83	33.63	476
4	36.78	37.15	36.48	37.38	327	4	35.40	35.58	35.25	36.89	627

HANDICAPPED PUPILS

The categories of handicapped pupils defined in The Handicapped Pupils and School Health Service Regulations, 1945, requiring special educational treatment have been discussed in previous annual reports.

The following particulars set out briefly the extent to which these pupils were receiving the special educational treatment they required during 1948.

BLIND PUPILS

SHEFFIELD SCHOOL FOR BLIND CHILDREN

The agreement reached between the Board of Management and the Sheffield Education Committee on the transfer of the school to the latter authority and its reorganisation as a Primary Special School were described in last year's report.

Accordingly the School Health Service undertook the medical, ophthalmic and dental supervision.

The pupils are seen by the ophthalmologist to the School Health Service and regular visits are paid by one of the school medical officers and a school nursing sister and the routine medical examinations are carried out. All ancillary services of the School Health Service are of course now available to the pupils. Four Sheffield children were maintained at the Sheffield School at the end of the year.

The Ophthalmologist carried out 97 examinations during the period under review and an analysis of the defects of 61 pupils follows :—

Optic atrophy	..	..	..	..	..	..	..	8
Anophthalmos	..	..	..	..	..	..	..	1
Congenital amblyopia	..	..	..	..	..	..	..	1
Congenital cataract	..	..	..	..	..	..	..	10
High myopia	..	..	..	..	..	..	..	4
Subluxation of both lens	..	..	..	..	..	..	..	1
Choroiditis	..	..	..	..	..	..	..	1
Enucleation of both eyes	..	..	..	..	..	..	..	4
Nystagmus	..	..	..	..	..	..	..	2
Congenital nystagmus	..	..	..	..	..	..	..	5
Retinitis pigmentosa	..	..	..	..	..	..	..	1
Myopic astigmatism	..	..	..	..	..	..	..	1
Hypermetropia	..	..	..	..	..	..	..	1
Albinism of retina and choroid	..	..	..	..	..	..	..	1
Sympathetic ophthalmia	..	..	..	..	..	..	..	1
Ophthalmia neonatorum (results of)	..	..	..	..	..	..	..	1
Lebers disease	..	..	..	..	..	..	..	1
Congenital cataract and nystagmus	..	..	..	..	..	..	..	1
Albinotic fundi	..	..	..	..	..	..	..	1
Microphthalmus	..	..	..	..	..	..	..	1
Corneal leucomata	..	..	..	..	..	..	..	1
Bilateral macular degeneration	..	..	..	..	..	..	..	1
Buphthalmos	..	..	..	..	..	..	..	2
Corneal nebulæ	..	..	..	..	..	..	..	2
Congenital amblyopia	..	..	..	..	..	..	..	1

Retinal degeneration	..	..	..	..	..	..	..	1
Aniridia	..	..	..	..	..	..	..	1
Irido-cyclitis (results of)	..	..	..	..	..	..	..	1
Enucleation right	..	..	..	..	..	..	..	} 1
Corneal nebulæ and peripheral iridectomy, left					..	..	..	
Enucleation right	..	..	..	..	..	..	..	} 1
Disorganised globe left	..	..	..	..	..	..	..	
Corneal nebula right	..	..	..	..	..	..	..	} 1
Enucleation left	..	..	..	..	..	..	..	
Phthisis bulbi right..	..	..	..	..	..	..	..	} 1
Old iritis left	..	..	..	..	..	..	..	

Glasses were prescribed in 5 cases.

The pupils at the Sheffield School for Blind Children were dentally inspected during the year and treatment was carried out for those leaving to go to the senior school, before leaving Sheffield. All necessary treatment had not been completed for the new entrants before the year end.

The figures, those in brackets being the corresponding figures for 1947, show those requiring treatment of the number examined. Very few of those residents who were fully treated last year required any treatment which explains the lesser number referred at the inspection.

Number Inspected	Number found to require Treatment
62 (72)	33 (55)

PARTIALLY SIGHTED PUPILS

The education of these children who need special educational treatment is given in the Bents Green Special School for the Partially Sighted. The children are recommended by the ophthalmologist before admission to this school.

The number on roll at the end of the year was 30.

During the year the National Institute for the Blind supplied further optical aids for trial at the school. It will be recalled that the Committee willingly gave their consent when the trials with other types were undertaken last year. As a result a number of models of improved type were purchased with distinct benefit to those children who can make use of them. It is gratifying to note that research is still continuing on the most suitable type of optical aid for these handicapped children.

DEAF PUPILS

There were 71 children on the registers of the Maud Maxfield School for the Deaf at the end of the year. Each child is under the supervision of Mr. Cobb, the Aural Surgeon, who pays regular visits to the school. The much anticipated provision of a new school is about to be realised as contracts are now being placed for its construction.

PARTIALLY DEAF PUPILS

The children whose hearing is very defective attend the Maud Maxfield School. It has not yet been possible to arrange lip-reading tuition for those children who can remain in the ordinary schools.

DELICATE PUPILS

DAY SCHOOLS

These children are accommodated at Whiteley Wood, Springvale House and Bents Green. There are 384 day places for boys and girls.

RESIDENTIAL SCHOOL

There are 50 residential places for girls at Bents Green Special School.

EDUCATIONALLY SUB-NORMAL PUPILS

There are 140 places for girls (juniors and seniors) at the Highfield Special School. For junior boys there are 95 places at the Hillsborough Special School and 160 places for senior boys at the Wadsley Bridge Special School.

It is a pleasure to report that a practical room and kitchen have been provided during the year and that an existing hut has been converted into a dining room at Wadsley Bridge Special School.

At the Highfield Special School a kitchen has been provided and a store-room is being converted into Medical Inspection and Treatment Rooms.

The Voluntary Association for Mental Welfare undertakes the visitation and supervision of the ex-pupils of the special schools who have not been officially reported to the Mental Welfare Committee. The number this year is 37. Reports are obtained from the Voluntary Association twice a year.

The work undertaken during the year with the children following special reports on their school attainments are shown below :—

RESULTS OF EXAMINATIONS.

Recommended for admission to day special school	82
Recommended for admission to residential special school	5
Found educationally sub-normal and unfit for ordinary or special school	22
Found to be educationally sub-normal—for further consideration and for special educational treatment	43
Found to be educationally sub-normal—for special educational treatment	17
Found to be educationally sub-normal and deaf—recommended special school for the deaf	2
Found to be epileptic	3
Admitted to special school for the physically handicapped	3
Admitted to special school for the delicate	4
Referred to the Child Guidance Clinic for investigation	6
No disability of mind	3

ANALYSIS OF CHILDREN LEAVING THE SPECIAL SCHOOLS FOR EDUCATIONALLY SUB-NORMAL.

Allowed to leave before 16 years of age	42
Left on attaining the age of 16	6
Reported to be incapable of receiving further benefit	4
Reported to be detrimental	1

REPORTED TO LOCAL AUTHORITY (Mental Welfare Committee).	Boys.	Girls.
Children incapable of receiving benefit from instruction in a special school	22	12
Educationally sub-normal children reported on leaving a special school on or before attaining the age of 16 ..	6	6

EPILEPSY

Children who suffer from severe epilepsy are sent to the various boarding special schools. On the other hand children who suffer from mild epilepsy are kept under medical supervision and are encouraged to attend school.

DIABETES

The Sheffield Authority are responsible for one boy at the Hutton Diabetic Unit who requires "special educational treatment." One girl has been sent to the Diabetic Convalescent Home, Birchington.

The other pupils known to be suffering from this disease are fortunately able to obtain the requisite treatment and care, and the numbers known at the present time can be given most conveniently in this section.

The figures are :—Boys, 11 ; Girls, 9.

PHYSICALLY HANDICAPPED PUPILS

DAY SCHOOLS

There were 66 boys and girls on the rolls of the Nether Green Special School and 50 boys and girls on the rolls of the Arbourthorne North Special School.

Regular visits are paid to these schools by the orthopædic surgeon.

RESIDENTIAL SCHOOL

Ash House School

The transfer of this school to the Regional Hospital Board has been discussed in the earlier sections.

There is accommodation for 42 boys and girls at Ash House School for children recovering from rheumatism, chorea or heart disease. The function of this school has been fully described in previous reports. During the year 51 children were discharged. The average length of treatment was eight months, one week, four days.

After discharge from Ash House the children are followed up at the Rheumatism and Heart Clinic held at the Central Clinic. The further history of these children is shown in brief by the following table :—

Over age	2
Fit for ordinary school	42
Fit for grammar school	2
Left city	1
Transferred to hospital	1
Temporarily unfit	2
Awaiting examination	1
	51

The classification of the conditions from which these children suffered are shown in the table below :—

Rheumatic carditis	..	..	..	..	..	..	..	32
Post rheumatic carditis	..	..	..	..	..	..	..	10
Chorea with rheumatic carditis	..	..	..	..	..	..	..	5
Chorea	..	..	..	..	..	..	..	2
Rheumatoid arthritis with rheumatic carditis	..	..	..	..	..	..	..	1
Rheumatic carditis with acute nephritis	..	..	..	..	..	..	..	1
								51

Dr. Gordon has submitted the following report :—

“ Ash House School has been continuously full during the past year, but in spite of the decision to admit non-Sheffield cases, we have not had to refuse applicants for admission because of insufficient space. However, when the existence of the school becomes very widely known in this area, I think that there is no doubt there will be sufficient cases to fill 80–100 beds. To provide this accommodation a new building will be necessary. It is to be hoped that this can be done in the not too distant future, because our main problem in the past year has been the management of boys between the ages of 10–15 years. Boys in this group comprise approximately one-quarter of the children requiring hospital school treatment for rheumatic carditis. These are children who most resent the necessary restrictions in physical activity which are imposed upon them. To deal with their natural exuberance requires more staff, particularly during the out-of-school hours, than we are able to accommodate.

Apart from these difficulties the other problem has been that there are even more children requiring bed rest for long periods than in previous years. The ultimate prognosis of these children is good, but meanwhile their nursing care throws considerable strain on the staff of Ash House, who have to work exceedingly hard to combat these difficulties.”

WELFARE OF SPASTICS

The formation of the British Council for the Welfare of Spastics in 1946 has stimulated interest in the care of children suffering from cerebral palsy. A conference for Local Authorities under the aegis of the Council was held in April, 1948, and the nature of the problem was clearly surveyed.

The ascertainment of the children suffering from this condition has been continued. Whilst it is possible to accommodate some of these children in the day schools for physically handicapped pupils it is very difficult to obtain places in the few residential special schools which have been opened to accommodate these children. The possibility of a regional school for this condition being opened locally is being explored.

HOME TUITION

Under Section 56 of the Education Act, 1944, it is fortunately possible to arrange home tuition for eight children who are so severely handicapped that they are unable to attend any school and for whom the Minister's approval has been obtained.

MEDICAL TREATMENT

The school medical officers pay regular visits to all the special schools for the purpose of routine and survey examinations.

DENTAL TREATMENT.

Dental inspection and treatment were carried out in the special schools including the open-air schools, King Edward VII Hospital School and the Sheffield School for Blind Children.

DENTAL INSPECTION AND TREATMENT—SPECIAL SCHOOLS.

Number of pupils inspected by the Authority's Dental Officers :—

(a) Periodic age groups	..	..	..	..	..	..	..	137
(b) Specials	..	..	..	..	..	..	..	94
(c) TOTAL (Periodic and Specials)	..	..	..	..	..	..	..	231
Number found to require treatment	..	..	..	..	..	..	..	184
Number actually treated	..	..	..	..	..	..	..	153
Attendances made by pupils for treatment	..	..	..	..	..	..	..	319
Fillings :								
Permanent teeth	..	..	..	..	..	..	..	118
Temporary teeth	..	..	..	..	..	..	..	11
Total	..	..	..	..	..	..	..	129
Extractions :								
Permanent teeth	..	..	..	..	..	..	..	65
Temporary teeth	..	..	..	..	..	..	..	221
Total	..	..	..	..	..	..	..	286
Administrations of general anæsthetics for extractions	..	..	..	..	..	..	..	195
Other operations :								
(a) Permanent teeth	..	..	..	..	..	..	..	52
(b) Temporary teeth	..	..	..	..	..	..	..	3
Total (a) and (b)	..	..	..	..	..	..	..	55

PARTICULARS OF HANDICAPPED PUPILS

	In Special Schools		In maintained Primary and Secondary Schools		In Inde- pendent Schools		Not at School		Total	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
Blind pupils	5	4	—	1	—	—	—	—	5	5
Partially sighted pupils ..	20	10	1	—	—	—	—	—	21	10
Deaf and partially deaf pupils	44	33	1	—	—	—	1	—	46	33
Delicate pupils	201	175	31	48	—	—	1	—	233	223
Diabetic	1	—	10	8	—	—	—	1	11	9
Educationally sub-normal pupils	255	145	179	33	2	1	9	7	445	186
Epileptic pupils	9	7	38	29	—	—	3	9	50	45
Physically handicapped pupils	119	92	52	44	3	1	30	20	204	157
Pupils suffering from multiple disabilities :—										
E.S.N. and epileptic ..	2	2	1	1	—	—	2	2	5	5
E.S.N. and physically handicapped	6	11	3	—	—	—	4	2	13	13
E.S.N. and blind	1	—	—	—	—	—	—	—	1	—
E.S.N. and deaf	1	1	—	—	—	—	—	—	1	1
E.S.N., epileptic and blind	1	—	—	—	—	—	—	—	1	—
E.S.N., epileptic and physically handi- capped	—	1	—	—	—	—	—	—	—	1
E.S.N. and delicate ..	—	—	1	1	—	—	—	—	1	1
Epileptic and physic- ally handicapped ..	2	—	—	—	—	—	—	1	2	1
Physically handicapped and blind	—	—	—	—	—	—	1	—	1	—
Blind and deaf	—	—	—	—	—	—	1	—	1	—

PARTICULARS OF CHILDREN WHO ARE MAINTAINED IN
RESIDENTIAL SPECIAL SCHOOLS, OUTSIDE SHEFFIELD

DECEMBER, 1948

	<i>Boys.</i>	<i>Girls.</i>	<i>Total.</i>
BLIND CHILDREN.			
Royal Normal College for the Blind, Rowton Castle	—	2	2
Yorkshire School for the Blind, York	—	2	2
Sunshine Home for the Blind, Haydon Bridge, Northumberland	1	—	1
			5
DEAF CHILDREN.			
Anerley Residential Deaf School, Penge	1	—	1
Mary Hare Grammar School for the Deaf, Burgess Hill	—	1	1
			2
DELICATE CHILDREN.			
Liverpool Open Air Hospital, Leasowe	1	1	2
Children's Convalescent Home, West Kirby, Wirral	1	—	1
			3
EDUCATIONALLY SUB-NORMAL CHILDREN.			
Besford Court Catholic Mental Welfare Hospital, Worcester	1	—	1
The Beacon School, Lichfield	2	—	2
Monyhull Colony, Birmingham	—	3	3
Allerton Priory R.C. Special School, Liverpool ..	—	1	1
			7
EPILEPTIC CHILDREN.			
The Maghull Home for Epileptics, Liverpool ..	2	1	3
Chalfont St. Peter Colony, Bucks.	—	1	1
Soss Moss Residential School for Epileptic Children, Manchester	4	2	6
David Lewis Epileptic Colony, Colthurst House School, Warford	—	1	1
			11
PHYSICALLY HANDICAPPED CHILDREN.			
Burton Hill House, Malmesbury, Wilts	—	1	1
Bosworth Park Special Unit, Bosworth Park Infirmary, Nuneaton	1	—	1
			2
DIABETIC CHILDREN.			
Hutton Diabetic Unit, L.C.C. Special School ..	1	—	1
MALADJUSTED CHILDREN.			
Ledston Hall, Allerton Bywater	1	—	1
Holly House Hostel, Chesterfield	—	1	1
Hoober House Hostel, Wentworth	—	1	1
			3

AFTER CARE

The purpose and principles underlying the after-care of handicapped pupils and the functions of the After-care Officer have been described in previous reports.

The preliminary "leaving conferences" continue to be held as described in last year's report.

The advantages of registration of certain types of handicapped children under the Disabled Persons (Employment) Act have been carefully considered and during the year 13 pupils with various handicaps were reported on Form ED 211 (DP) as being suitable for registration accordingly.

Miss Stirgess, the After-care Officer, reports on the year's activities :—

"During the year under review the employment conditions have continued to favour the handicapped children and there have been quite a good variety of jobs from which to choose. There is, however, still a tendency for the parents and the children to choose the highly paid semi- and un-skilled jobs in preference to learning a trade but, as will be seen from the table following this report, during the year under review it has been possible to place well over 50 per cent. of the school leavers in trades. We should, however, like to see a still higher percentage of the handicapped children learning a trade as the problems of unemployment—more likely to develop in semi- and unskilled work—are so difficult to overcome in the case of the handicapped child whose choice of employment is necessarily limited.

There have been problems during the year but with the helpful co-operation of the teachers, juvenile employment officers, employers and welfare officers they have been overcome. In addition to the valuable co-operation previously referred to the parents have also, on the whole, co-operated, so assisting in the complete effectiveness of the after-care supervision.

Under the auspices of the Sheffield Voluntary Association for Mental Welfare a club has been opened for the old scholars and final year scholars of the Wadsley Bridge Special School and through the medium of the Youth Organisations the Education Authority has been very helpful in providing accommodation for the club within easy reach of the city and allowing a grant towards the cost of equipment, etc. The club is held every Friday evening during the school terms and is staffed by the headmaster and several of the masters and mistresses of the Wadsley Bridge Special School who give their services voluntarily. Table-tennis, darts and a number of other games are available and it is anticipated that many more activities will be arranged in due course. This work will be of particular value to the after-care of the educationally sub-normal boys as it offers facilities for the staff of the Wadsley Bridge Special School and the After-care Officer to keep in closer touch with the Youths during the first few years of their working life.

During the year 542 visits have been made by the After-care Officer to cases under 21 years of age. Of the cases under after-care supervision 153 are ex-pupils of the schools for the educationally sub-normal ; 31 are deaf ; 11 partially sighted ; 64 physically handicapped other than cripples and 154 are ex-pupils of the open-air schools."

**EMPLOYMENT OF PUPILS HAVING LEFT SPECIAL SCHOOLS
DURING THE YEAR UNDER REVIEW**

Occupation	Educa- tionally Sub-normal		Deaf		Partially Sighted		Physically Handi- capped		Delicate		Total
	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	
Bookbinding and printing ..	—	—	2	—	—	—	—	—	—	—	2
Painting and decorating ..	—	1	—	1	—	2	—	—	—	—	4
Cutlery trade ..	3	3	—	4	—	—	—	—	—	—	10
Brickyard labourer ..	—	5	—	—	—	—	—	—	—	—	5
Shop assistant ..	—	1	—	—	—	—	—	1	1	1	4
Pick maker ..	—	1	—	—	—	—	—	—	—	—	1
Boot repairer ..	—	2	—	—	—	—	—	—	—	—	2
Upholstery ..	—	—	—	—	—	—	—	1	—	—	1
Cabinet case lining ..	1	—	1	—	1	—	—	—	—	—	3
Canteen work ..	—	—	1	—	—	—	—	—	—	—	1
Moulder ..	—	—	—	2	—	—	—	—	—	—	2
Warehouse hand ..	5	—	—	—	—	—	—	—	1	—	6
Tea packing ..	—	—	—	—	—	—	—	—	1	—	1
Van boy ..	—	—	—	—	—	—	—	1	—	—	1
Saw worker ..	—	—	—	—	—	—	—	1	—	—	1
Lorry mate ..	—	1	—	—	—	—	—	—	—	—	1
Railway worker ..	—	1	—	—	—	—	—	—	—	1	2
Property repairer ..	—	1	—	—	—	—	—	—	—	—	1
Builder's apprentice ..	—	1	—	—	—	—	—	—	—	—	1
Garage hand ..	—	2	—	—	—	—	—	—	—	1	3
Box making ..	1	—	—	—	—	—	—	—	—	—	1
Bakehouse hand ..	1	—	—	—	—	—	—	—	—	—	1
Overall machinist ..	1	—	—	—	—	—	—	—	—	—	1
Sweetmaker and packer ..	1	—	—	—	—	—	—	—	—	—	1
Coremaker ..	—	—	—	—	—	—	—	—	—	1	1
Printing trade ..	—	—	—	—	—	—	—	—	—	1	1
Grate fixer ..	—	—	—	—	—	—	—	—	—	1	1
Clerk ..	—	—	—	—	—	—	1	—	1	1	3
Surgical instrument maker ..	—	—	—	—	—	—	—	—	—	1	1
Cabinet case maker ..	—	—	—	1	—	—	—	—	—	1	2
Farming ..	—	—	—	—	—	—	—	—	—	1	1
Errand boy ..	—	—	—	—	—	—	—	—	—	2	2
Hotel page boy ..	—	—	—	—	—	—	—	—	—	1	1
Electrician's apprentice ..	—	—	—	—	—	—	—	—	—	1	1
Machine turner ..	—	—	—	—	—	—	—	—	—	1	1
Window cleaner ..	—	—	—	—	—	1	—	—	—	—	1
Canteen waitress ..	1	—	—	—	—	—	—	—	—	—	1
Hammer driver ..	—	2	—	—	—	—	—	—	—	—	2
Pit head worker ..	—	2	—	—	—	—	—	—	—	—	2
At home—awaiting hospital treatment ..	—	—	—	—	—	—	1	—	—	—	1
Occupation unknown ..	—	—	—	—	—	—	—	—	—	1	1
	14	23	4	8	1	3	2	4	4	16	79
Learning a definite trade ..	6	14	3	8	1	2	—	2	1	10	47
In semi-skilled and unskilled work ..	8	9	1	—	—	1	1	2	3	5	30
At home, in hospital, institution, etc. ..	—	—	—	—	—	—	1	—	—	—	1
Occupation unknown ..	—	—	—	—	—	—	—	—	—	1	1
	14	23	4	8	1	3	2	4	4	16	79

FULL TIME COURSES OF HIGHER EDUCATION FOR HANDICAPPED STUDENTS

The Minister of Labour and National Service assumed from 5th July, 1948, full responsibility for the craft training of blind persons of 21 years of age and over. On that date one Sheffield student only was in attendance at the Corporation's Workshops for the Blind.

The annual medical inspection was carried out during the year before the 5th July, and the defects discovered received treatment.

The Education Committee are still responsible for the craft training of blind persons under 21 and during the year the following students continued attendance at recognised training institutions :—

One boy at Henshaw's Institution for the Blind, Manchester (Boot repairing).

One girl at Henshaw's (transferred on 8th September, 1948, to the Liverpool School for the Blind) (Women's crafts).

In addition one boy commenced in January a trial period training at the Yorkshire School for the Blind, but was withdrawn in December, as he showed no signs of becoming proficient in a craft.

Three youths are being maintained at the Derwen Cripples' Training College, Oswestry.

HEALTH EDUCATION.

A full discussion on " Health Education " was given in last year's report.

It is a pleasure to report that keen interest in this subject is being maintained in the schools.

Teachers and school nursing sisters attended the special lectures arranged by the Central Council for Health Education locally. There were two separate courses of lectures, the subjects being chosen with special relation to the groups attending.

Dr. Marion C. Taylor, during the year, has kindly given lectures in the Course for Nursery Nurses which entails getting students up to a national examination standard. Dr. Charles O. Greer gave the required lectures to the students attending the Child Care Reserve Course for those working in the Nursery Classes and Schools.

Sisters Dent and Scott helped in these courses and gave " practical " demonstrations.

Red Cross and St. John First-aid lectures were also given by members of the staff. Talks on the School Health Service have been well received at various guilds and societies.

Members of the staff of the School Health Service have given lectures and demonstrations to students in training from the Department of

Education at the University and the City and Brincliffe Training Colleges. Various parties of these students visited the clinics and the special schools.

Thanks are due to the teachers who demonstrate and co-operate so willingly during these visits.



MISCELLANEOUS.

BOYS' REMAND HOME.

During the year 149 boys were admitted.

REASONS FOR ADMISSION :—

Out of control, plus :—

1. Truanting	11
2. Theft	9
3. Running away	1
Absconders from schools and institutions	13
Larceny	49
Attempted housebreaking	6
Indecent assault	4
Arson	3
House, school or shop-breaking	45
Burglary	1
Assault	3
False pretences	1
Trespassing	1
Wilful damage	2

All the boys were medically examined before admission and the Home has been regularly visited by a medical officer. The following conditions were treated during the year :—

Skin conditions :—

Whitlows	1
Impetigo and sores	11
Boils	7
Dermatitis	1
Acne	1

Coryza group :—

Common cold	1
Enuresis	19

Eye conditions :—

Blepharitis	2
---------------------	---

Ear, nose and throat conditions :—

Follicular tonsillitis	1
--------------------------------	---

One boy had teeth extracted at the School Clinic and two boys received treatment at the City General Hospital for sprains.

Each boy's head was carefully cleansed on admission and it was found during this period that ten per cent. had verminous heads.

The School Medical Officer again desires to express his appreciation of the effective help given during the year by the Superintendent and Matron in carrying out the treatment prescribed.

GIRLS' REMAND HOME.

During the year 97 girls were resident in the Home for varying periods.

The reasons for admission are as follows :—

Larceny	32
Care or protection	26
Out of control	18
Breach of recognizance	10
Indecent telephone messages	1
Drunk and incapable	1
For psychological investigation	2
House-breaking	3

The girls were medically examined on admission, and the Home was visited by a medical officer as required. Because of their history a number of girls were recommended for examination at the Jessop Hospital. Three girls were found to be suffering from venereal disease and were removed to special treatment schools. Three girls received treatment at the Royal Infirmary on account of slight concussion, sprained ankle and severe cut on arm. One girl was admitted to Fir Vale Institution for observation regarding her mental condition. One girl was admitted to the City General Hospital for examination and treatment for venereal disease.

The following conditions were treated in the Home :—

Urticaria	1
Tonsillitis	3
Epileptic fit	1
Sprained ankle	1
Otorrhœa	1
Swollen glands	1
Common cold	1

Two girls had teeth extracted at the School Clinic.

It was found that 95 per cent. of the girls' heads were verminous on admission. Two of the girls also had body lice.

The School Medical Officer again desires to express his appreciation of the help extended by the staff of the Jessop Hospital, and to record the effective assistance given by the Matron.

SPECIAL EXAMINATIONS

Special examinations have been carried out as follows :—

Candidates for appointment in the service of the Education Committee	151
Examination for Stage Licence	14
Juvenile Court Cases	334
For admission to Approved Schools	35
Fitness of school applicants for agricultural employment	122
Quarterly medical examination of " Boarded-out " children	69
Fitness for Newspaper Delivery	605

EMPLOYMENT OF CHILDREN

The following table which has been furnished by the Superintendent of Education Welfare Officers, gives particulars of applications for part-time employment of school children :—

Nature of Employment :—						Boys.	Girls.	Total
News delivery (morning only)	..	..	..	..	..	11	3	14
„ (evening only)	..	..	..	..	..	14	15	29
„ (morning and evening)	..	..	..	..	..	149	38	187
„ (morning, evening and Sundays)	..	..	..	..	..	274	26	300
„ (Sundays only)	..	..	..	..	..	5	1	6
„ (morning and Sundays)	..	..	..	..	..	31	1	32
„ (evening and Sundays)	..	..	..	..	..	28	4	32
						<u>512</u>	<u>88</u>	<u>600</u>

Errands for :—

Grocers	..	..	..	..	..	25	4	29
Greengrocers	..	..	..	..	..	4	—	4
Butchers	..	..	..	..	..	49	1	50
Bakers and confectioners	..	..	..	..	..	2	—	2
Chemists	..	..	..	..	..	2	1	3
Tailors	..	..	..	..	..	1	—	1
Miscellaneous	..	..	..	..	..	3	4	7
						<u>86</u>	<u>10</u>	<u>96</u>

Applications refused :—

Medically unfit	..	..	..	..	..	3	2	5
Grammar School children	..	..	..	..	..	5	1	6
Under age	..	..	..	..	..	2	—	2
Cancelled by employer or parent	..	..	..	..	..	22	—	22
						<u>32</u>	<u>3</u>	<u>35</u>

Children employed in farming and agriculture	..	..	..	..	..	<u>101</u>	<u>13</u>	<u>114</u>
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MEDICAL INSPECTION RETURNS

YEAR ENDED 31ST DECEMBER, 1948

TABLE 1.

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED
PRIMARY AND SECONDARY SCHOOLS (INCLUDING SPECIAL SCHOOLS).

A—PERIODIC MEDICAL INSPECTIONS

Number of Inspections in the prescribed Groups—

Entrants	6,751
Second Age Group	6,913
Third Age Group	3,676
TOTAL	17,340

Number of other Periodic Inspections

..	..	..	..	—
GRAND TOTAL	..	..	17,340	

B—OTHER INSPECTIONS

Number of Special Inspections	51,727
Number of Re-Inspections	47,503
TOTAL	99,230

C—PUPILS FOUND TO REQUIRE TREATMENT

NUMBER OF INDIVIDUAL PUPILS

FOUND AT PERIODIC MEDICAL INSPECTION TO REQUIRE TREATMENT
(excluding Dental Diseases and Infestation with Vermin)

Group (1)	For defective vision (excluding squint) (2)	For any other conditions recorded in Table IIA (3)	Total individual pupils (4)
Entrants	88	547	631
Second Age Group	140	401	536
Third Age Group	148	159	298
Total (prescribed groups)	376	1,107	1,465
Other Periodic Inspections	—	—	—
GRAND TOTAL	376	1,107	1,465

TABLE II.

**A—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION
IN THE YEAR ENDED 31ST DECEMBER, 1948.**

Defect or Disease (1)	PERIODIC INSPECTIONS		SPECIAL INSPECTIONS	
	Number of defects		Number of defects	
	Requiring treatment (2)	Requiring to be kept under observation but not requiring treatment (3)	Requiring treatment (4)	Requiring to be kept under observation but not requiring treatment (5)
Skin	61	26	4,409	7
Eyes—(a) Vision	376	293	870	315
(b) Squint ..	79	44	166	69
(c) Other ..	24	19	25	17
Ears—(a) Hearing ..	44	19	124	118
(b) Otitis Media	1	2	125	1
(c) Other ..	52	30	24	9
Nose or Throat ..	460	433	1,905	2,701
Speech	15	35	70	58
Cervical Glands ..	3	61	139	274
Heart and Circulation	26	59	149	75
Lungs	31	116	1,218	192
Developmental—				
(a) Hernia ..	5	17	30	11
(b) Other ..	—	—	18	22
Orthopædic—				
(a) Posture ..	19	22	16	2
(b) Flat foot ..	76	37	89	32
(c) Other ..	56	25	318	921
Nervous system—				
(a) Epilepsy ..	1	9	19	36
(b) Other ..	4	9	199	171
Psychological—				
(a) Development	1	36	42	44
(b) Stability ..	1	4	102	30
Other	186	231	2,573	4,383

B—CLASSIFICATION OF THE GENERAL CONDITION OF PUPILS
INSPECTED DURING THE YEAR IN THE AGE GROUPS.

Age Groups	Number of Pupils Inspected	A (Good)		B (Fair)		C (Poor)	
		No.	per cent of col. 2	No.	per cent of col. 2	No.	per cent of col. 2
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Entrants	6,751	3,421	50·67	3,199	47·39	131	1·94
Second Age Group ..	6,913	3,842	55·58	2,920	42·24	151	2·18
Third Age Group	3,676	2,443	66·46	1,209	32·89	24	0·65
Other Periodic Inspections	—	—	—	—	—	—	—
TOTAL	17,340	9,706	55·98	7,328	42·26	306	1·76

TABLE III.

TREATMENT TABLES

GROUP I.—MINOR AILMENTS

(excluding Uncleanliness, for which see Table V).

(a)	Number of Defects treated, or under treatment during the year.						
Skin—							
Ringworm—Scalp—							
(i) X-Ray treatment	..	..	..	..	..	..	1
(ii) Other treatment	..	..	..	..	..	..	9
Ringworm—Body	..	..	..	..	..	..	75
Scabies	..	..	..	..	..	..	278
Impetigo	..	..	..	..	..	..	380
Other skin diseases	..	..	..	..	..	..	3,653
Eye Disease (External and other, but excluding errors of refraction, squint and cases admitted to hospital)	..	..	..	..	..	..	1,957
Ear Defects	..	..	..	..	..	..	1,720
Miscellaneous (e.g., minor injuries, bruises, sores, chilblains, etc.)	..	..	..	..	..	..	10,602
TOTAL	..	..	..	..	..	..	18,675

(b) Total number of attendances at Authority's minor ailments
clinics 32,979

GROUP II.—DEFECTIVE VISION AND SQUINT
(excluding Eye Disease treated as Minor Ailments - Group I)

	Number of defects dealt with.
Errors of Refraction (including Squint)	5,614
Other defect or disease of the eyes (excluding those recorded in Group I)	152
TOTAL	5,766
Number of Pupils for whom spectacles were :	
(a) Prescribed	1,979
(b) Obtained	1,443

GROUP III.—TREATMENT OF DEFECTS OF NOSE AND THROAT

	Total number treated.
Received operative treatment :	
(a) for adenoids and chronic tonsillitis	656
(b) for other nose and throat conditions	101
Received other forms of treatment	161
TOTAL	918

GROUP IV—ORTHOPAEDIC AND POSTURAL DEFECTS

(a) Number treated as in-patients in hospitals or hospital schools	59
(b) Number treated otherwise, e.g., in clinics or out-patient departments	1,218

GROUP V.—CHILD GUIDANCE TREATMENT AND SPEECH THERAPY

Number of pupils treated :	
(a) under Child Guidance arrangements	493
(b) under Speech Therapy arrangements	229

TABLE IV.

DENTAL INSPECTION AND TREATMENT

(1) Number of pupils inspected by the Authority's Dental Officers :—

(a) Periodic age groups	..	..	..	..	..	..	20,128
(b) Specials	..	..	..	..	..	..	7,792
(c) TOTAL (Periodic and Specials)	..	..	..	..	..	..	27,920
(2) Number found to require treatment	..	..	..	..	..	..	22,165
(3) Number actually treated	..	..	..	..	..	..	15,551
(4) Attendances made by pupils for treatment	..	..	..	..	..	..	30,562
(5) Half-days devoted to (a) Inspection	..	..	..	..	..	..	253
(b) Treatment	..	..	..	..	..	..	3,413
Total (a) and (b)	..	..	..	..	..	..	3,666
(6) Fillings : Permanent Teeth	..	..	..	..	..	..	11,923
Temporary Teeth	..	..	..	..	..	..	138
Total	..	..	..	..	..	..	12,061
(7) Extractions : Permanent Teeth	..	..	..	..	..	..	3,336
Temporary Teeth	..	..	..	..	..	..	20,592
Total	..	..	..	..	..	..	23,928
(8) Administrations of general anæsthetics for extraction	..	..	..	..	..	..	14,424
(9) Other Operations : (a) Permanent Teeth	..	..	..	..	..	..	5,457
(b) Temporary Teeth	..	..	..	..	..	..	98
Total (a) and (b)	..	..	..	..	..	..	5,555

TABLE V.

INFESTATION WITH VERMIN

(i) Total number of examinations in the schools by the school nurses or other authorized persons	..	..	..	..	..	..	147,708
(ii) Total number of individual pupils found to be infested	..	..	..	..	..	..	5,664
(iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)	..	..	..	..	..	..	4,625
(iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3) Education Act, 1944)	..	..	..	..	..	..	—

SCHOOL HEALTH SERVICE

COST

The following particulars are furnished as to the cost of the School Health Service during the year ended 31st March, 1948:—

SECTION	Gross Expenditure	Income from Local Sources (other than Rates)	Net Expenditure ranking for Grant	Net Cost to Rates after deducting Government Grant, &c.	Cost in terms of Penny Rate	
					Gross Cost	Net Cost to Rates
	£ s. d.	£ s. d.	£ s. d.	£ s. d.	d.	d.
Medical Inspection and Treatment	90,443 12 8	167 5 3	90,276 7 5	41,399 15 0	6.55	3.00
Ablutionary Baths	1,259 12 10	—	1,259 12 10	577 13 2	0.09	0.04
Special Schools	70,876 14 2	11,040 4 0	59,836 10 2	27,440 7 4	4.34	1.99
TOTALS	162,579 19 8	11,207 9 3	151,372 10 5	69,417 15 6	10.98	5.03

APPENDIX

REPORT

OF THE

CHIEF SUPERINTENDENT OF PHYSICAL EDUCATION FOR THE YEAR ENDED 31st DECEMBER, 1948

1. *Introduction.*

Throughout the year, every endeavour has been made to improve the standard of performance in all phases of physical education. It is felt that the average child, on leaving school, should be radiantly healthy and that his or her whole attitude should be one of alertness, gracefulness and strength with a cheerfulness and courage that rise superior to most everyday difficulties. Physical Education, rightly applied, does help to produce these qualities and the opportunities for developing character through its medium are constantly emphasised.

The installation of climbing apparatus of various types into several schools is widening the scope of natural activities particularly in infant and junior departments.

Miss B. S. Hood commenced duties as Assistant Organiser of Physical Education in September, so that the staff is now for the first time at its immediate pre-war strength.

2. *Teachers' and Leaders' Courses of Training.*

It has always been the policy of the Education Committee to provide opportunities for teachers to keep in touch with modern methods of teaching technique. For the last eight years these classes have been held in out of school hours. In view of the demands for teachers' services in Play Centres, Evening Schools and Voluntary Organisations and also because of the many instructional classes for teachers in other subjects, it is very encouraging to find teachers enrolling for the following classes in worth while numbers :—

	No. enrolled.
i. Physical Training for men teachers of senior boys held at Abbeydale Grammar School	16
Physical Training for men teachers of senior boys held at King Edward Grammar School	24
Physical Training for men teachers of junior children held at the City Training College	29
Physical Training for men teachers of junior children held at the Abbey Lane County School	47

No. enrolled.

Physical Training for women teachers of senior girls held at Abbeydale Grammar School	30
Physical Training for women teachers of junior children held at Abbey Lane County School	21
ii. Swimming for men teachers held at Woodthorpe Baths (3 classes)	$\left\{ \begin{array}{l} 21 \\ 21 \\ 42 \end{array} \right.$
Swimming for women teachers held at Woodthorpe Baths (2 classes)	$\left\{ \begin{array}{l} 14 \\ 13 \end{array} \right.$
iii. Athletics and games for men teachers held at King Edward VII Grammar School	19
iv. Dance Courses—Folk (3 classes)	—
National and Aesthetic (2 classes)	—
v. Courses for teachers and leaders in Evening Schools, Evening Institutes and Youth Clubs :—	
(a) Recreative P.T. for men leaders held at High Storrs Grammar School	40
(b) Recreative P.T. for women leaders held at High Storrs Grammar School	27
(c) Ballroom Dance for men and women leaders held at Hatfield House Lane Secondary School :—	
Beginners' Class	18
Advanced Class	19
vi. Observers' Course for teachers of junior children held at Abbey Lane County School on successive Saturday mornings in June. There was a weekly average attendance of 110 men and women teachers. These observation classes were held mainly to supply the needs of teachers who for various reasons, were unable to take part in the normal practical classes.	
vii. The week-end school of Folk Dance in April at Hatfield House Lane Secondary School, the showing of the Bristol Physical Education Film at the Training College to the Froebel Society and a similar display at Southey Green Infants' School in conjunction with the Parents' Association there; the display of the Lawn Tennis Film at the Central Technical School and the Cricket Film at King Edward VII Grammar School proved, by the attendances, on the part of teachers, a desire to profit technically by these aids.	

3. *Voluntary activities which supplement physical education as carried out in school hours.*

In addition to the physical education which is a recognised part of the school curriculum, a vast amount of voluntary work is carried on in out of school hours by public spirited and interested teachers. Whilst this is largely of a recreational character, the social training involved cannot be ignored. Our boys and girls meet children from other areas and, no matter how keen have been the contests, it is a pleasure to pay tribute to their bearing at all times. It is felt that these experiences lay the foundation of a better understanding and appreciation of the difficulties and efforts of others and create a love for the decencies of life.

The Sheffield Schools' Athletic Association and the Sheffield Schools' Swimming Association are doing excellent work in this respect and they deal directly with the training of the children. Other organisations which influence school children directly because of the nature of their activities are the Sheffield Teachers' Netball Club, the Sheffield Teachers' Folk Dance Club and the Sheffield Aesthetic and National Dance Society.

i. The Sheffield Schools' Athletic Association is a very active organisation comprising sub-committees which are responsible for the following activities, association football, rugby football, cricket, athletics, netball and rounders. Mr. A. Greensmith has very ably performed the duties of secretary for many years, but has resigned the position on medical advice and Mr. E. Cornthwaite has succeeded him. The first athletic sports gathering since the war, apart from district sports held each year took place on the evening of July 7th and provided some interesting events. This was a departure from traditional procedure but it was thought that evening provided better opportunities for interested parents to enjoy their children's efforts, which was indeed, the case. Each sub-committee has initiated events of which it can be justifiably proud and these will be referred to later.

ii. The Sheffield Schools' Swimming Association, with Mr. S. Hartley as Secretary is another voluntary association accepting its responsibilities with a keen sense of loyalty. The year has been a very successful one. In addition to the four special voluntary training classes for advanced swimming, a class for grammar school girls has been arranged at King Edward VII Swimming Bath. Seventeen district galas and three final galas were held before the end of July and many long standing speed records were broken. In the Yorkshire County Schools' Gala which was held at Huddersfield in September, Sheffield school children were successful in winning the Bradford Trophy for the first time since 1934 and against the keenest competition. The trophy is awarded to the Yorkshire schools gaining the highest number of points and Sheffield boys' performances were outstanding.

In the first Inter-County Gala between Yorkshire and the Midland Counties which was staged at the Woodthorpe Baths, 11 Sheffield boys were chosen to represent Yorkshire with two boys and three Sheffield girls as reserves, Yorkshire gained an easy victory. The 11 Sheffield boys who swam will receive County colours. The return Inter-City contest between Derby and Sheffield Schools held at Woodthorpe Baths again proved the excellence of Sheffield swimmers. Michael Hatcliffe's performances in all these galas prove him to be the outstanding boy swimmer in Yorkshire for his age.

Morley Street County School are to be congratulated on winning the English Schoolboys' Team Championship Yorkshire Area and only losing in the semi-final of the same competition by a touch to Sunderland.

iii. The activities of the Sheffield Teachers' Netball Club have been disturbed this year as the hall of the Greystones Secondary School has not been available for the weekly Wednesday practice. In spite of this, membership has increased and the team has had interesting fixtures with Leeds Training College, Leeds University, Owler Lane Secondary and Ashton-under-Lyne. Both first and second teams won all their matches.

The two tournaments arranged by the Club for junior school children on Saturday, October 16th, and for senior school children on Saturday, October 23rd, engaged 30 junior and 14 senior teams, 350 children taking an active part. Two of the City Girls Grammar Schools, the Sheffield High School and the Training College were also represented.

iv. The Sheffield Teachers' Folk Dance Club increased its membership to 100 during the year and a good sign was the enrolment of more men teachers. Mrs. Mitchell undertook the duties of honorary teacher successfully from April to December owing to the indisposition of Miss Mawson.

Included amongst the many activities are the week-end school held at Hatfield House Lane Secondary School and the seven area folk dance parties for school children. The former was attended by 50 teachers and approximately 150 adults attended the social gatherings, whilst an average of 120 children took part in each of the area parties.

The Club has given demonstrations at Hathersage and Dore and its members have taken an active part in week-end schools and festivals at London, Leicester, Leeds, York, Manchester and Buxton.

v. The Sheffield Aesthetic and National Dance Society which is another teachers' instructional dance class with the freer atmosphere of a club and whose honorary teacher is Miss E. K. Brooks has confined its attentions mostly to instructional evenings. The membership of the club in the second half of the year has increased to 70.

4. *Activities in the Schools.*

(a) *Physical Training.*

Purely formal exercises are giving place to movements based on the natural activities of children. These include running, jumping, climbing and throwing and whilst the character of a physical training lesson becomes more informal it has, at the same time, a more practical basis. This does not mean that movements are less smartly performed or are less accurate than hitherto. Insistence on good form in the execution of activities throughout a child's life means good poise and carriage and a corresponding conservation of energy. The general standard of performance in the schools shows improvement. Scrambling nets have been installed in the playground of eight infant schools and experiments are being conducted in other schools with indoor nets. Another form of portable apparatus for junior

children which allows a variety of enjoyable movement, is being tried. The apparatus already installed gives opportunities for a variety of stronger movement whilst developing initiative and calling for some courage in the efforts made.

(b) *Games.*

The value of games training is fully appreciated and every class has its scheduled weekly games period. Not all games periods, however, can be played under ideal conditions. This implies the use of a playing field in close proximity to the school. Infant and junior departments use their playgrounds and some senior classes have to do the same, adapting their games to suit conditions. In these circumstances, it is not possible to enjoy the major national games to advantage. The fullest use is made of the Committee's own playing fields and all pitches are used to capacity. Part of the Hurlfield Road (Commonside Farm) playing field site was de-requisitioned in September and now provides two football, one shinty, one touch and pass and one netball pitch for winter games.

The rehabilitation of two tennis courts at Myers Grove will be completed in the present financial year. Use of the public tennis courts has been made by senior children using Concord Park but this can only happen where such courts are not largely used in school hours by the general public. The system of booking courts prohibits their general use by school children and it is not possible to reserve them for definite daily periods. Increasing provision of tennis courts and hockey pitches is being made each year.

As in last year's report it is necessary to repeat that there is still danger through over-enthusiasm of concentrating attention on the school team to the disadvantage of the bulk of players, who, being less skilful need most encouragement and training. Lack of playing space at present makes it impossible for all league matches to be played in out of school hours.

League Competition results are given as follows :—

(i) *Football* (Association).

Competition	Teams Taking Part	Winners	Runners-up
Clegg Shield	47	Southey Green Sec.	Springfield Mixed.
Wednesday Shield	46	Meynell Road Sec.	Carfield Secondary.
United Shield	33	Intake Mixed.	Brightside Mixed.
Daily Dispatch Shield	37	Coleridge Road Sec.	Arbourthorne Sec.
Daily Dispatch Shield (Yorkshire Trophy)	—	Coleridge Road Sec.	Selby Sec. Tech.
Handsworth Trophy	38	Meynell Road Sec.	Intake Mixed.
Grammar Schools	5	Barnsley Grammar.	Ecclesfield Grammar.

The Sheffield City Team played friendly matches with Leicester, Nottingham, Newcastle, Chesterfield, Grimsby and Salford, and these aroused great interest. 20,800 spectators witnessed the Sheffield *v.* Newcastle match at Owlerton. The generosity of the Directors of Sheffield Wednesday Football Club, the Atlas and Norfolk Sports Club, the Brightside and Carbrook Co-operative Society Sports Club, English Steels Sports Club, Sheffield Forge Sports Club, City Police Sports Club, City Surveyors and the Nunnery Colliery Sports Club in loaning their grounds for special matches is commendable and without these loans of grounds the finances of the Sheffield Schools' Athletic Association would have suffered badly and the progress of a very fine voluntary movement would have received a severe set back.

Coleridge Road Secondary School's achievement in winning the Daily Dispatch Yorkshire Shield Competition was a meritorious one as they are the only Sheffield Schools' Team to have done so. A. Quixall of Meynell Road Secondary School was honoured by the English Schools' Association in being chosen to play for England against both Scotland and Wales and K. Scott of Owler Lane Secondary School played in the North *v.* North Midlands International Trial and for Yorkshire against London.

Southey Green Secondary School are to be congratulated on achieving the rare distinction of winning the Clegg Shield for the fourth year in succession.

(ii) *Football (Rugby).*

The enthusiasm of a group of schools has ensured steady progress in the second full year of the rugby code's progress. The new league is now successfully established and sufficient experience has been gained to show that both codes may be played equally well in one school. It is surprising that the chief interest is at present centred in the secondary modern and county mixed schools. The two outstanding matches of the year were played against Gloucestershire at the Niagara Police Ground and against Leicestershire at Abbeydale Club Ground. The first game was drawn and the second lost by the narrow margin of 3-8 points. The results indicated the progress which rugby has made in a relatively short time and reflects much credit on those schools which have shown so much enthusiasm. N. Oxley of Prince Edward Secondary School, after two seasons of rugby football was selected to play in a final international trial at Coventry.

Competition	Teams Taking Part	Winners	Runners-up
Senior—Price Cup 	18	Shirecliffe Sec.	Coleridge Road Sec.
Junior 	5	Burngreave Sec.	Meynell Road Sec.

(iii) *Rugby Touch.*

A junior competition was organised for the first time and was well supported. This game, which is preparatory to rugby football is very popular. Fifteen schools entered the junior and 19 the senior competition.

Competition	Winners	Runners-up
Junior	Phillimore Road Junior.	Lydgate Junior.
Senior	Burngreave Secondary.	Owler Lane East.

(iv) *Cricket.*

The short playing season coupled with insufficient satisfactory pitches does not help to produce a general high standard of play. In many cases pitches have to be hurriedly prepared after the winter season, on football pitches. Concrete pitches form a useful alternative to grass and provision has been made for several to be laid ready for the forthcoming season. Keen interest is shown in the game and the City Team in its inter-city visits, gave a good account of itself at Derby on the County Ground, at Barnsley and at Parkhead against Rotherham. Fifty-four schools took part in the Stokes (senior competition) and 43 schools in the Barber (junior competition).

Competition	Winners	Runners-up
Stokes Shield	Arbourthorne North Sec.	Southey Green Secondary.
Barber Shield	Whitby Road Boys.	Southey Green Secondary.

Arbourthorne North Secondary School have not only won the Stokes Shield for three years in succession but they have not lost a match in that time.

(v) *Netball.*

This game is growing in popularity. It has the advantage that it can be played on a small area and on an asphalt playground and that equipment is not elaborate. A very good standard of play in both the tournaments and league competitions indicated good coaching throughout the city. The City Netball Team has had a very successful season and by winning the County Tournament at Leeds became holders of the Yorkshire County Netball Championship.

League results are :—

Competition	Teams Taking Part	Winners	Runners-up
Senior teams from Large Schools	19	Pipworth Road Sec.	Shirecliffe Secondary.
Senior teams from Small Schools	12	Nether Green Mixed.	Sharrow Lane G. & J.
Junior teams from Large Schools	11	Coleridge Road Sec.	Wisewood Secondary.
Junior teams from Small Schools	4	Nether Green Mixed.	Woodhouse County.

(vi) *Rounders.*

Rounders still maintains its hold as the girls' chief summer game and the various events initiated during the year are proof of the liveliness and enthusiasm of the Rounders Sub-Committee. The Yorkshire Inter-cities Rounders Tournament was held at Abbeydale Playing Field in June. Seven other Yorkshire Towns and cities were represented and the finalists were the Sheffield A and B teams. Sheffield A team now holds the Yorkshire Rounders Championship.

The Sheffield Inter Schools Rounders Tournament held in Abbeydale Playing Field in July, is an outstanding event. Forty-five senior, 27 junior and 14 junior boys' teams entered this year, the boys' entry being the first of its kind. Over 1,000 children took an active part and the tournament lasted from 10 a.m. to 5 p.m. In the early stages at least 14 games proceeded simultaneously. The excellence of the play proved that the games coaching period is taken seriously.

The tournament results were :—

Competition	Winners	Runners-up
Senior	Pipworth Road Sec. A.	Pipworth Road Sec. B.
Junior	Woodthorpe Junior.	Woodseats Girls.
Junior Boys'	Malin Bridge Junior.	Heeley Bank Mixed.

In the leagues the same enthusiasm prevailed and reorganisation was necessary owing to the extra year. There are now five leagues with 130 teams instead of two leagues as last year.

League	Teams Taking Part	Winners	Runners-up
Senior (S.3 & S.4)	24	Shiregreen Sec.	Pipworth Road Sec.
Intermediate (S.1 & S.2) ..	27	Pipworth Road Sec.	Woodbourn Mixed.
Small Schools	25	St. Marie's R.C.	Gleadless M. & I.
Junior Girls'	30	Park M. & I.	Woodhouse West.
Junior Boys'	24	Malin Bridge Junior.	Hammerton J. & I.

Rounders is a very valuable preparatory game for cricket, particularly with regard to fielding and it is a triumph to have enthused the boys so much, as boys generally look upon rounders as a "girls' game."

(vii) *Athletics.*

Systematic training for athletics is confined to a few schools. It is hoped that this phase of Physical Education will develop, particularly amongst the older boys who will thus have a greater choice of extending their knowledge of recreative activities which they will be able to pursue after leaving school. One reason for the slowness of development of field events has been the shortage and expensiveness of such equipment as discoi, javelins and shot, etc.

In the City Final Sports at Niagara Police Ground, 3,000 entries were received from 45 schools and Springfield County Mixed School obtained the greatest number of points. The City Team took part in the Yorkshire Championships at Bridlington and obtained second in the boys' and second in the girls' long jump and third in the boys' 100 yards race.

(viii) *Tennis and Hockey.*

Apart from the Grammar schools there is a lack of facilities for playing tennis and hockey, except at Myers Grove Playing Field. Public tennis courts have been used during the past year and several of the secondary modern schools have taken up these games. No league competitions have yet been arranged but friendly matches have been played with other schools. Provision is being made for more hockey pitches and tennis courts, as it is desirable that senior children should have a knowledge of these popular national games.

(ix) *Dance.*

Dance in one form or another is included as part of the physical education of every progressive school where facilities allow. In its best form it is correlated with music and art and where it is systematically and purposefully taught the effect on children's carriage and bearing generally leaves no doubt that time so spent is a real gain. The learning of a few set dances

for a particular occasion only, such as May Day ceremonies is discouraged as it has little educational value. In a few schools the children are encouraged to interpret music or poetry or a theme in terms of movement and here the training value is of the highest order. A ballet "The little Mermaid" based on a Hans Anderson's Story and produced by Marlcliffe Secondary School was an excellent production, whilst the modern dance at High Storrs Grammar School is sound musical as well as educational dance training.

(x) *Swimming.*

Steady progress has been made throughout the year and the successes mentioned earlier in the report are indicative of good foundation work. It is still only possible to provide for a part of the swimming places needed by girls.

An interesting experiment is proceeding with swimming for physically handicapped children from Nether Green (boys and girls) and Arbourthorne Special Schools (boys), and also with boys from the Blind School. Progress in the former cases has been most marked both in regard to distances swum and improvement in physique. Good progress is being made by the blind children in the few visits they have made to the baths.

i. *Lengths Certificates* gained :—

Lengths in Yards	Boys					GIRLS				
	1944	1945	1946	1947	1948	1944	1945	1946	1947	1948
50	727	693	763	904	265	466	480	454	412	478
100	432	466	517	590	613	356	325	303	378	403
250	344	398	399	429	445	249	285	279	287	314
440	571	506	583	574	704	405	412	395	539	496
880	556	456	510	454	588	306	298	256	329	391
	2,630	2,519	2,772	2,951	2,615	1,782	1,800	1,687	1,945	2,082

Grand Totals	1944	..	..	4,412
	1945	..	..	4,329
	1946	..	..	4,459
	1947	..	..	4,896
	1948	..	..	4,697

This is 199 certificates less than the previous year, and whilst the girls have gained 137 certificates the boys have less by 236. This loss is mainly due to provision being made for swimming for the older boys who have been encouraged to swim for the highest certificate it was possible for them to obtain instead of taking a lower certificate.

ii. *Life Saving.*

Awards to Sheffield school children were made by the Royal Life Saving Society during the past five years as follows :—

Year	Intermediate Certificate	Bronze Medallion	Points Gained
1944	1,157	561	6,320
1945	1,115	642	6,585
1946	1,103	682	6,824
1947	1,258	454	6,044
1948	1,366	820	8,918

To the awards for 1948 are to be added 69 Elementary Life Saving Certificates, 12 Bars to Bronze Medallions, two Scholar Instructor's Certificates, two Royal Life Saving Society Instructors' Certificates and three Awards of Merit. These examinations were arranged by individual schools, and the points gained from these awards will be added to the 8,918 by the Royal Life Saving Society.

Awards gained by Grammar Schools are not included in the above results.

The National Shield was won by Bristol Schools who scored 3,929 points. Sheffield scored 8,918 points, the highest in the country but this award is made on a percentage basis. Sheffield's increase over last year was almost 3,000 points.

Other Royal Life Saving Trophy results are :—

The Viner Shield won by Woodthorpe Secondary School.

The Telegraph Cup won by St. Stephen's C.E. School.

The William Henry Trophy (Intermediate) won by St. Stephen's School.

The Biggin Shield won by Wisewood Secondary School (boys).

The Harry Bolton Cup won by Morley Street Mixed School (boys).

The William Henry Trophy (style) won by Walkley Mixed School (boys).

St. Stephen's School record of swimming awards in both Life Saving and lengths certificates over a number of years is one of which any school could be justifiably proud.

iii. *Medallions of Merit.*

These are awarded by the Sheffield Schools' Swimming Association to school children who pass a varied and exacting test and in addition possess a Life Saving Award. Only an excellent all-round swimmer can hope to pass this test.

Forty-five boys and 27 girls, making a total of 72 gained this award last year.

Year	Boys	Girls	TOTAL
1945	16	16	32
1946	17	14	31
1947	14	12	26
1948	45	27	72

Again the improving standard is reflected in these results.

iv. *The Yorkshire Standard Certificate Test Examination.*

This award is also very much prized and the test, like the Medallion of Merit indicates a very good all-round swimmer.

Year	Boys		GIRLS		TOTAL
	Number tested	Number passed	Number tested	Number passed	
1947	71	22	37	4	26
1948	91	41	45	17	58

These results are the best yet obtained in this test.

v. *Visits to Baths.*

Year	In school hours	Out of school hours	TOTAL
1944	169,332	102,650	271,982
1945	165,115	108,957	274,072
1946	184,922	102,875	287,797
1947	194,999	81,050	276,049
1948	244,406	103,911	348,317

Of the 1948 total, visits during school hours were made by 163,908 boys and 80,498 girls, whilst 58,356 boys and 45,555 girls visited swimming baths in out of school hours.

vi. *Free Passes to Baths.*

The number of free passes granted this year equals the highest number gained in pre-war years. These are awarded by the Baths Committee to a boy or girl in each department of a school which gains 20 swimming certificates a year and attends the Corporation Swimming Baths for instruction.

Children attending Woodthorpe Swimming Bath and King Edward VII Swimming Bath are awarded free passes by the Education Committee under similar conditions.

Previous to this the Baths Committee had extended the privilege to all children receiving swimming instruction. These passes are an incentive to children to use the public swimming baths out of school hours.

Passes were awarded as follows :—

City Team—11 boys	..	..	..	..	..	}	23
12 girls	..	..	..	..	..		
Special Training Scheme	..	..	..	..	..		100
School Passes—92 boys	..	..	..	..	..	}	168
76 girls	..	..	..	..	..		
					TOTAL ..		<u>291</u>

Passes granted for the past five years are :—

1944	..	..	..	..	..	..	238
1945	..	..	..	..	..	..	244
1946	..	..	..	..	..	..	273
1947	..	..	..	..	..	..	243
1948	..	..	..	..	..	..	291

5. *School Sports, Galas and Tournaments.*

Each year sees an increase in the number of individual school sports and school swimming galas and 1948 was no exception. This is a very encouraging sign as they indicate a healthy school spirit. All have been marked by excellent organisation and are really first rate spectacles apart from their educational value. In addition to those galas, tournaments and sports already mentioned, a Hockey Tournament arranged by High Storrs Grammar School for Girls and held on their ground attracted a large number of outside grammar school entries and provided some very good exhibitions of the game.

6. *Demonstrations.*

For many years demonstrations of some phase of Physical Education have been staged in the Public Parks in co-operation with the Parks Department. These were enjoyed by public and performers alike. Four demonstrations were given by :—

- i. Youth groups—"Keep Fit"—
Y.W.C.A. and Gleadless Youth Club.
- ii. Evening School and Evening Institute—Recreative Physical Training—
Hatfield House Lane Evening School Youths and
Lindsay Road Club-Institute Girls.
- iii. Sheffield Keep Fit Association (2 Displays)—"Keep Fit"—
Croft House.
Longley and Western Road Teams.
- iv. Sheffield Youth Sports—Athletic Rally—
This was held in the University Sports Field and over 800 youths and young women took an active part. This was the 8th Annual Rally.

7. *Playing Fields.*

Last year's annual report indicated that playing fields belonging to the Education Committee are used to the utmost capacity and are indeed on account of the demands made on them overused. This is due not only to their use by schools but by youth and old scholars' associations at week-ends and most evenings during the summer months.

One difficulty which arises is the need for cricket pitches immediately after the football season. Preparation for a good wicket is necessary throughout the winter and this is impossible when the cricket pitch has to be superimposed on a football pitch. Owing to the contours of most of the Committee's Playing Fields, it is not always possible to arrange for a cricket pitch to be placed between two football or other similar pitches.

Gangwork takes place every winter when extensions to pitches are made and minor levelling operations are carried out. This ensures that no large areas of playing fields are put out of use at one time. Levelling is thus gradually carried out from year to year.

The large hollow at Abbeydale Playing Field alongside the Bannerdale Road Drive has been filled in and prepared as a playground for Hurlfield Grammar School for Girls. It will be used for both netball and tennis. Galvanised iron shelters for the storage of tools and as emergency shelters are in course of construction at Bradway and Prince of Wales Road Playing Fields.

The pavilion and showers for the use of the Central Technical School at Ringinglow are being completed.

The cricket pitch at Hurlfield Road Playing Field has been considerably raised and extended to four times its original area.

8. *Recreative Physical Training for Adolescents and Adults.*

i. *Evening Schools and Club-Institutes.*

Most forms of physical activity are provided in Evening Schools and Evening Institutes, with the main purpose of creating and maintaining healthy physical habits. In order that activities shall be purposeful and not merely just weekly meetings, every effort has been made to develop various competitions. Most of the schools and institutes take part in League Football and the success of Woodbourn Club-Institute is encouraging.

Swimming awards were gained as follows :—

Elementary Certificate	..	..	..	..	1
Intermediate Certificate	..	..	..	..	4
Bronze Medallion	..	..	..	..	4
Bar to Bronze Medallion	..	..	..	..	8
Bronze Cross	..	..	..	..	1
Award of Merit	..	..	..	..	2
Bar to Award of Merit	..	..	..	..	1

The results of the Evening Schools Competitions were :—

Physical Training	Winners	Points	Runners-up	Points
Boys—Senior ..	Woodseats E.S.	262½	Hatfield House Lane E.S.	258½
Junior ..	Arbourthorne C.I.	288	Lindsay Road C.I.	231
Girls—Senior ..	Western Road E.S.	282½	Lindsay Road C.I.	262½
Junior ..	Owler Lane E.S.	275	Coleridge Road C.I.	268

Swimming Gala	Winners	Points	Runners-up	Points
Boys—Viner Cup ..	Wisewood E.S.	32	Woodthorpe C.I.	17
Girls—Challenge Cup	King Edward “ Keep Fit ” Class.	26	Woodthorpe C.I. Burngreave.	{ 10 10

First Aid Competition	Winners	Points	Runners-up	Points
Transport Service’s Cup	Prince Edward.	167½	Hatfield House Lane.	151

All four sections of the Physical Training Competitions were represented this year.

A challenge Cup was presented to the Evening Schools for competition and is awarded to the opposite sex to that winning the Viner Cup. It was won for the first time by the King Edward VII “ Keep Fit ” Class (women).

As in the previous year, the “ First Aid ” Competition was adjudicated by members of the Sheffield Branch of the St. John’s Ambulance Corps and this was carried out in a most thorough and systematic manner.

ii. The Education Committee continues to provide instructors for most types of recreative activities when requested by the various affiliated Youth Organisations. This demand grows yearly.

iii. Details regarding evening schools, club-institutes and voluntary organisations are given as follows :—

District Evening Schools	Jan.—Mar.		April—July		Oct.—Dec.	
	Males	Females	Males	Females	Males	Females
1. PHYSICAL TRAINING						
Number of Students enrolled	224	122	—	—	269	231
	(Classes 18)				(Classes 28)	
KEEP FIT CLASSES.						
Number of Students enrolled	57	54	—	—	—	109
	(Classes 5)				(Classes 4)	
DANCING.						
Number of Students enrolled	264	529	—	—	378	757
	(Classes 22)				(Classes 30)	
SWIMMING.						
Number of Students enrolled	124	125	—	—	79	77
	(Classes 10)				(Classes 9)	
FIRST AID & HOME NURSING.						
Number of Students enrolled	67	24	—	—	37	14
	(Classes 6)				(Classes 7)	
2. RECREATIVE ACTIVITIES						
A Number of Students enrolled	43	189	135	120	55	209
	(Classes 10)		(Classes 9)		(Classes 9)	
B SWIMMING (King Ed. VII Bath)						
Number of Students enrolled	39	21	96	75	40	41
	(Classes 2)		(Classes 6)		(Classes 2)	
3. NUMBER OF TEACHERS EMPLOYED						
A Physical Training, Keep Fit, Dancing and Swimming ..	17	22	4	5	21	30
B HOME NURSING & FIRST AID	3	1	—	—	4	2
C PIANISTS	6	20	—	3	8	24
D NUMBER OF DOCTORS ..	5	—	—	—	—	—

Club-Institutes	Jan.—Mar.		April—July		Oct.—Dec.	
	Males	Females	Males	Females	Males	Females
1. PHYSICAL TRAINING						
A Number of Students enrolled	158	59	87	54	172	34
	(Classes 21)		(Classes 9)		(Classes 18)	
B KEEP FIT CLASSES.						
Number of Students enrolled	—	14	—	10	—	—
	(Classes 1)		(Classes 1)			
C DANCING.						
Number of Students enrolled	118	145	53	65	162	170
	(Classes 12)		(Classes 7)		(Classes 13)	
D SWIMMING.						
Number of Students enrolled	43	—	18	15	42	2
	(Classes 3)		(Classes 2)		(Classes 2)	
E FIRST AID & HOME NURSING						
Number of Students enrolled	—	23	—	57	—	56
	(Classes 2)		(Classes 2)		(Classes 5)	
2. NUMBER OF TEACHERS EMPLOYED						
A Dancing, Physical Training, Keep Fit and Swimming ..	13	10	9	5	14	8
B HOME NURSING & FIRST AID	—	2	—	—	—	2
C PIANISTS	1	5	1	4	1	3
D NUMBER OF DOCTORS ..	—	—	—	—	—	—

YOUTH ORGANISATIONS. (Voluntary)	Jan.—Mar.		April—July		Oct.—Dec.	
	Males	Females	Males	Females	Males	Females
1. NUMBER OF INSTRUCTORS. Appointed by the Education Committee (Physical Training, Keep Fit, Dancing and Swimming)	29	39	29	36	31	27
2. NUMBER OF PIANISTS		31		31		30

9. *Conclusion.*

In concluding this report, the Chief Superintendent would like to express appreciation of the generous help he has received from the Director ; the kindly co-operation of all the Official Staff including his personal colleagues ; the practical support of Dr. Cohen and the School Health Service Staff and of the friendly relationships existing with the teaching staff. The encouragement always given by the Education Committee to any phase of education which is of benefit to the children is a stimulus at all times.

FRED CARR,

*Chief Superintendent of
Physical Education.*



